## L13000140196

(Requestor's Name)						
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(Business Entity Name)						
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 13, 2019

EXPERT RADIOLOGISTS ON CALL, LLC 102 NE 2ND ST #151 BOCA RATON, FL 33432

SUBJECT: EXPERT RADIOLOGISTS ON CALL, LLC

Ref. Number: L13000140196

We have received your document for EXPERT RADIOLOGISTS ON CALL, LLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The business entity that you are forming cannot serve as its own registered agent. You may designate an individual or another business entity with an active registration or filing with this office. The newly designated registered agent must have a Florida street address and must sign accepting the designation. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

Letter Number: 819A000190065

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

.1. Na	ame of the limited liability company: Expert Radio	ologists	On Call LI	LC			
2. (a)		(	b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liabil (Note: MAY BE POST OFF					•
	102 NE 2nd Street Ste 151		102 NE 2nd Street #151				
	Boca Raton FL 33432		Boca Ra	aton FL 33432			
	10/3/2013		L130001	40196			
3.	Date of filing/registration in Florida	<del></del> 4.		Document number			
5. (a)	NRAI Services						
3. (u)	Registered Agent and Registered Office shown on the records of	of the Flori	da Dept, of Stat	<del>-</del> :e:			
	1200 South Pine Island Rd						
	Registered Office Address (MUST BE FLORIDA STREET	_					
	Miami	33324	<b>1</b>	-	<u>च</u> ≥:०	201	
(b)						2019 OCT	الا_
(0)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	ddress:	_		I -2	**************************************
	Expert Radiologista On Gally LLC #OWA	aro j	Defke	245	-u.	PH	
	NEW Registered Office Address:		- ,			÷	$\cup$
	102 NE 2nd Street #151			<del>-</del>	117	œ	
	Boca Raton , I	<sub>.L</sub> 33432	2	_			
the cha agent v was/w/ the agri	imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Of in the case of a Florida limited ere authorized by affarfirmative vote of the members icles of organization or the operating agreement of the operating agreement of the operating agreement of the operation of a member-	of the reg liability of of the li- ne limited	gistered offic company, it is	e and the business of is hereby confirmed ty company or as oth mpany.	office of that the herwise p	the reg chang	gistered e(s)
I here provisi the obl to mer	hy accept the appointment as registered agent and a ions of all statutes relative to the proper and comple lightions of my position as registered agent as provid ely reflect a change in the registered office address, then writing offices change.	te perfori led for in	mance of my Chapter 60.	pacity. I further agr duties, and I am far 5. F.S. Or, if this do	ree to con miliar wi ocument i	th ana is beir	l accept 12 filed