

L14000048202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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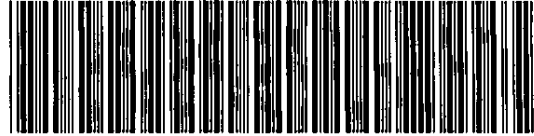
(Business Entity Name)

(Document Number)

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CLERK OF COURT  
HALL COUNTY, FLORIDA

ED

AUG 31 2016

Y SULKER

**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. Name of the limited liability company: SOUTHERN DENTAL GRP LLC
2. (a) 3512 DEL PRADO BLVD #102 (b) 3512 DEL PRADO BLVD #102  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

3. 3/24/2014 Date of filing/registration in Florida 4. L14000048202 Document number

5. (a) NUBIA GALEANO  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3512 DEL PRADO BLVD #102  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
CAPE CORAL, FL 33904  
\_\_\_\_\_, FL \_\_\_\_\_

16 AUG 29 AM 11:41  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

- (b) NUBIA GALEANO  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

3512 DEL PRADO BLVD #102  
**NEW** Registered Office Address:  
\_\_\_\_\_  
CAPE CORAL, FL 33904

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

NUBIA GALEANO  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]  
Signature of Registered Agent