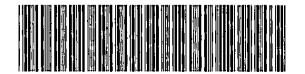
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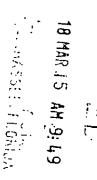
(Re	questor's Name)					
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PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: March 13, 2018

Order#: 104128/005

Re: CENTRAL FLORIDA LEGAL NURSE CONSULTING, PLLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

(u)	4340 Antietam Creek Trail	(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Leesburg FL 347748		Leesburg	FL 347748	
	July 1, 2015		L15000114216		
	Date of filing/registration in Florida	4.	Docum	nent number	
5. (a)	D-Ann Ross				
. ,	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State:		
	13302 Winding Oak Court				
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)			
	Suite A			700	
	Tampa , I	₹L <u>33612</u>			
(b)	Corporation Service Company			S. 5 	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	<u>ed Office add</u>	ress:	5 AM 9: 49	
	1201 Hays Street	 		ψ W	
	NEW Registered Office Address:				
	Tallahassee , F	-I_ 32301			
he cha gent w vas/we	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the S of the regist liability cor s of the limi	ered office and the npany, it is hereby ted liability compa	e business office of the registere confirmed that the change(s)	
/s/ D-A	nn Ross	D-An	n Ross, Member		
Signat	ture of a member or authorized representative of a member		Printed	or typed name of signee	
l heret rovisi	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provic ly reflect a change in the registered office address.	gree to act i le performa led for in C	n this capacity. 1 nce of my dutics, a hanter 605 FS 7	further agree to comply with the ind I am familiar with and accep Or if this document is being filed	