Page 1 of 2

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000218484.3)))



HI 50002133843A6CO

Note: OO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

. 0 :

Davioion of Composations

Par Number : (850)617-8383

Property.

Account Name : CRAPY, BUCHANAN, BONGTEN, F7 AL

Account Number : 074424001425 Phone : (772)287-2500 Fax Number : (772)287-01(5)

**Cover the email address for this business entity to be used for future samual report medians. Enter only one small address presse. **

Email Address: rob marcheline a net scape met

RECEIVED SEP 10 PM 4: 11

LLC REGISTERED AGENT CHANGE TANGO X-RAY, LLC

Certificate of Status	()
Certified Copy	()
Page Count	81
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H15000218484 3)))

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.

ame of the limited liability company: Tango X-Ray	7	3500 SW Cantra Court	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
Palm City, FL 34990	<u>P</u>	alm City, FL 34990	
August 12, 2015	— L1	5000138187	
Date of filing/registration in Florida	4.	Document number	
Marc I. Levine	,		
		pt. of State:	
2100 SE Ocean Blvd.			
Stuart	34994		
	d Office addres	15 SEP 10 AM	
	L_34990		
ange or changes are made, the Floridalstreet address o will be identical. Or, in the case of a filorida limited li	of the register iability comp of the limited e limited liab	ed office and the business office of the registered pany, it is hereby confirmed that the change(s)	
by accept the appointment as registered agent and ag lons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ity reflect a change in the registered office address. I d in writing of this change.	ree to act in e performanc ed for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Palm City, FL 34990 August 12, 2015 Date of filing/registration in Florida Marc I. Levine Registered Agent and Registered Office shown on the records of Registered Office Address 2100 SE Ocean Blvd. Stuart Stuart NEW Registered Office Address: 3500 SW Centre Court Palm City Imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a florida limited letter authorized by an affirmative vote of the members icles of organization or the operating agreement of the large of a member or authorized representative of a member of the large of a florida limited letter authorized by an affirmative vote of the members icles of organization or the operating agreement of the large of a member or authorized representative of a member of the large of a florida limited letter authorized by an affirmative vote of the members icles of organization or the operating agreement of the large of a member or authorized representative of a member of a member or authorized representative of a member of a member or authorized representative of a member of a member or authorized representative of a member of the proper and complete ligations of my page of the appointment as registered agent agent agent agent and agent of the proper and complete ligations of my page of the appointment as registered agent agen	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Palm City, FL 34990 August 12, 2015 Date of filing/registration in Florida Marc I. Levine Registered Agent and Registered Office shown on the records of the Florida De Registered Office Address 2100 SE Ocean Blvd. Stuart Enter name of NEW Registered Agent and/or NEW Registered Office address NEW Registered Office Address: 3500 SW Centre Court Palm City Palm Cit	

Division of Corporations • P.O. Box 6327 • Taliahassee, FL 32314 FILING FEE: \$25.00