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A. RIVERS

COVER LETTER

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Enclosed is a check for the follow	ving amount:
Address Hollywood Gty/State and Zip Co Tacho Bus-ry For further information concerning this ma Tacho Oh Name of Person Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Care. Com annual report notification)
Taeho Oh Name of Person US-Rx Care Firm/Company	
Please return all correspondence concernin	g this matter to the following:
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Dear Sir or Madam:	
SUBJECT: SPECIALTY	BENEFITS MANAGEMENT GROUP LLC Name of Limited Liability Company
TO: Registration Section Division of Corporations	

INHS18 (2/14)

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.

I. Na	une of the limited liability company: SPECIAL TY BENEFITS N	LANAGEMENT GROUP LLC
2. (a)	(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)
	4600 Sheridan St., Ste 200	
	Hollywood, FL 33021	
	11/29/22 L15	1000152258
3.		Document number
5. (a)	David Fasano Registered Agent and Registered Office shown on the records of the Florida Dept. of State	
		•
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Ste. 400	2022 551
	Ft. Lauderdale FL 33312	
(ď)	Taeho Oh	DEC 28
(Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	4600 Sheridan St., Ste 200 NEW Registered Office Address:	पः 31 रहोते:
	Hollywood ,FL 33021	
change agent v was/wo	imited liability company is not organized under the laws of the State of Floror changes are made, the Florida street address of the registered office and will be identical. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited liability icles of organization or the operating agreement of the limited liability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	Tacho Oh Tae	Printed or typed name of signee
provisi the obl to merc	hy accept the appointment as registered agent and agree to act in this capa ions of all statutes relative to the proper and complete performance of my a ligations of my position as registered agent as provided for in Chapter 605, ely reflect a change in the registered office address, I hereby confirm that t d in writing of this change.	icity. I juriner agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been

Signature of Registered Agent