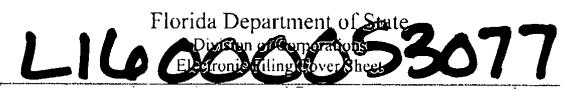
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## LLC REGISTERED AGENT CHANGE TOWNCARE DENTAL OF FORT LAUDERDALE, PLLC

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MAY 0 3 2024

## 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.

	ie of the limited hability company:				UDERDALE, PLLC	
) _	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b)	b) 6240 LAKE OSPREY DRIVE  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
-	FORT LAUDERDALE, FL 33308	- -		SARASOT	ΓΑ, FL 34240	
C	03/15/2016		L	160000530	77.	
.) _'	Date of filing/registration in Florida ALLEN, RUSSELL	4.	_		Document number	
R	Registered Agent and Registered Office shown on the records of the			Dept. of State	- 2: -	
-	Registered Office Address <u>(MUST BE FLORIDA STREET AI</u> SARASOTA , FL				. 20	
	T Corporation System  Intername of NEW Registered Agent and/or NEW Registered C			<u>ess</u> :	2024 HAY -2	
-	NEW Registered Office Address:				2 PH 2:	
	1200 South Pine Island Road				<u></u>	
i	Plantation FL 3	3324			_	
ang wil ere	nited liability company is not organized under the laws go or changes are made, the Florida street address of the libe identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of less of organization or the operating agreement of the libe data.	he re pility the l imite	giste con imit d lia	ered office pany, it is ed liability ability con	e and the business office of the registe s hereby confirmed that the change(s) y company or as otherwise provided i	
ulur	re of a member or authorized representative of a member	_			Printed or typed name of signee	
eby sion slig rely ed i	e accept the appointment as registered agent and agreens of all statutes relative to the proper and complete plations of my position as registered agent as provided wreflect a change in the registered office address, I have writing of this change.  CT Corporation System  SENTLEMERICK ASSISTANT SECRETARY	e to e perfor for i greby	ict i mai n Ci con	n this cape nce of my e napter 603 firm that	acity. I further agree to comply with duties, and I am familiar with and ac 5, F.S. Or, if this document is being fi the limited liability company has bee	

Signature of Registered Agent