L16000160216

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
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MAY 0 2 2018

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : 181670 8187131

AUTHORIZATION (

COST LIMIT US 25.0

ORDER DATE: April 25, 2018

ORDER TIME : 8:42 AM

ORDER NO. : 181670-025

CUSTOMER NO: 8187131

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CHANGE OF AGENT

NAME: MEDICAL SERVICES DIRECT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

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.	Na	me of the limited liability company:	MEDICAL SERV	ICES D	IRECT, LL	С			
2.	(a)			(b)					
	,	Principal office address of limited liabili (Note: MUST BE STREET ADD	ty company:	_ (/		Mailing address of lin (Note: MAY BE P	nited liabi	ility com	
		2655 N Ocean Drive #500		_	2655 N C	Ocean Drive #500			
		Singer Island FL	33404		Singer Is	land, FL 33404			
		08/26/2016		_	L1600016	60216			
3.		Date of filing/registration in Fl	orida	4.		Document number	er		
5.	(a)	Taggart, Robert, Jr.							
	()	Registered Agent and Registered Office shown of	on the records of th	e Florida !	Dept. of State	- e:			
		240 Palm Sparrow Ct							
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-	- 5	21	
							SECRETARY OF STATE ALLAHASSEE, FLORIG	2018 MAY - I	
						-	AE	Y A H	1
		Daytona Beach	, FL	32119		_	ASE.	1	
							E Y		m
	(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	JIMAN Desistened C	VC as add		-	E.S.	A	
		Enter hame of NEW Registered Agent and/or p	CE W Registereu C	mice aug	<u>ress;</u>		25	9: 03	` ```
		1201 Hays Street					Ď.	ದ	
		NEW Registered Office Address:			<u> </u>	_			
						-			
		Tallahassee	, FL_	32301		-			
If	the li	mited liability company is not organized	l under the laws	s of the S	State of Flo	orida, it is hereby	confirm	ed tha	t after
the	cha	nge or changes are made, the Florida str vill be identical. Or, in the case of a Florida	eet address of the	he regist	ered office	e and the business	office (of the r	egistered
wa	is/we	re authorized by an affirmative vote of t	he members of	the limi	ted liability	y company or as o	therwis	se prov	ided in
		cles of organization or the operating agr		imited li	ability con	ipany.			
	Rol	<i>DEPT H. TAGGAPT JP.</i> ure of a member or authorized representative of a		Robe	rt Taggart,				
						Printed or typed nan	_		
pro the to	ovisie obli mere	by accept the appointment as registered ons of all statutes relative to the proper igations of my position as registered age by reflect a change in the registered offi I in writing of this change.	agent and agree and complete p ent as provided ce address, I he	e to act i verforma for in Co vreby co	nce of my o hapter 605 nfirm that i	duties, and I am fo i, F.S. Or, if this a the limited liabilit	gree to c amiliar docume ty comp	comply with a nt is be any ha	with the nd accept ring filed s been
	رُحُ	mila Cant			Emily				
Śi	gnatui	re of Registered Agent Corporation Service	e Company	BY: A	sst. Vice	President			
		Division of Corpora							

FILING FEE: \$25.00