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## LLC REGISTERED AGENT CHANGE JO ANN AGRESS PHD, PLLC

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K. SALY AUG 1 6 2017

## 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: <u>JO ANN AGF</u>	RESS PHD	, PLLC					
2. (a)	(a) .	20410 TALON TRACE  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing addr	20410 TALON TRACE  Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		ESTERO, FL 33928			ESTERO, FL 33928				
			<del></del>						
		09/16/2016		L10	5000173828				
3.		Date of filing/registration in Florida	4.	Documen	nt number				
5.	(a)	CORPORATION SERVICE COMPANY							
	. ,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
		1201 HAYS STREET		•					
	Registered Office Address (MUST BE FLORIDA STREET)								
			7,	,	20				
				<del></del>					
		TALLAHASSEE , FL	32301						
(b)	(b)	Registered Agents Inc.			2017 AUG 15 AM 9: 39				
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	<u>.</u>	五五					
				70 9					
	3030 N. Rocky Point Dr.		- <del></del>	至 3					
		NEW Registered Office Address:							
		STE 150A							
		Tampa	33607						
the age was the	cha ent we s/we arti-	mited liability company is not organized under the large or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of eles of organization or the operating agreement of the large of a member or authorized representative of a member.	ws of the Sta The registere ability compact the limited limited liabi	ed office and the bany, it is hereby elliability companity company.  Riley Parinted or this carrecty. I for	ousiness office of the registered on firmed that the change(s) by or as otherwise provided in ark  typed name of signed with the county with the provider of signed with the county with the county with the county with the				
noi	ijice	or uccept the appointment as registered agent that age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I fin writing of this change.	d for in Chay hereby confi	oter 605, F.S. Or orm that the limited	, if this document is being filed d liability company has been				

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