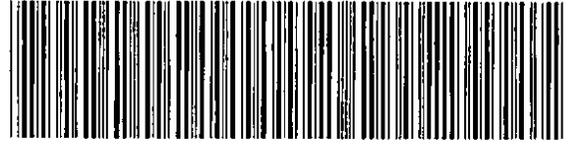


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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May 31, 2023

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Bruno Vision Care, LLC
Statement of Change of Registered Office

Dear Sir/Madam:

Enclosed herewith please find a Statement of Change of Registered Office for **Bruno Vision Care, LLC**, along with our check in the amount of \$25.00 made payable to Florida Department of State for the filing fee.

Thank you for your cooperation in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'A. R. Friedman', with a long horizontal flourish extending to the right.

Andrew R. Friedman

ARF
Encl.

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.

Bruno Vision Care, LLC

1. Name of the limited liability company: _____

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

2255 Glades Road, Suite 324A

2255 Glades Road, suite 324A

 Boca Raton, FL 33431

 Boca Raton, FL 33431

3/27/17

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3. Date of filing/registration in Florida 4. Document number

Friedman, Rosenwasser & Goldbaum, P.A.

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

7280 W. Palmetto Park Road, Suite 202

Boca Raton 33433
 _____, FL _____

Friedman, Rosenwasser & Goldbaum, P.A.

(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

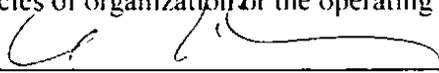
NEW Registered Office Address:

5550 Glades Road, Suite 500

Boca Raton 33432
 _____, FL _____

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 2023 JUN -5 PM 4: 01

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

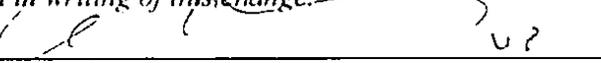


Andrew R. Friedman

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



Signature of Registered Agent