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SECKETARY OF STATE

S Warren

MAY - 2 2017

COVER LETTER

то:	Registration Section Division of Corporations						
SUBJ	Christopher Beach, D.M.D.,	PLLC					
Name of Limited Liability Company							
Dear S	Bir or Madam:	•					
The er	nclosed Rogistered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning the	s matter to the following:					
Danie	el P. VanEtten, Esq.						
	Name of Person						
Bíalo	ck Walters, P.A.						
	Firm/Company						
802 1	11th Street West						
	Address						
Brade	enton, Florida 34205						
	City/State and Zip Code						
EPer	nnington@blalockwalters.com						
Ī	E-mail address: (to be used for future ann	unl report notification)					
For fu	rther information concerning this matter,	please call:					
Danie	el P. VanEtten	941 748-0100					
	Name of Person	Area Code & Daytime Telephone	Number				
Registration Section Registration Division of Corporations Division of C Clifton Building P.O. Box 632		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:							
	☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
INHSI	8 (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.

1. N	nme of the limited liability company: Christopher B	each,	, D	.M.I)., P	LLC	
	Principal office address of limited liability company:					Mailing address of limite	
()	(Note: MUST BE STREET ADDRESS)		(-)			Mailing address of limite (Note: MAY BE POS	
	1995 County Road 1			205	1 Sv	van LN	
	Dunedin, Florida 34698			Pal	m Ha	arbor, Florida 346	83
	04/03/2017		l	_170	000	74888	
3.	Date of filing/registration in Florida	4.	_			Document number	
5. (a)							
υ. (m)	Registered Agent and Registered Office shown on the records of t	he Flor	ida	Dept.	of Stat	e:	
	Blalock Walters, P.A.					_	3 55 3
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u>(33</u>			_	Fg Z
	802 11th Street West					_	製きコ
	Bradenton , FL						HAY -1 PM
							लिन द्व व
(b)	Enter name of NEW Registered Agent and/or NEW Registered						3: 1 STAT STAT
	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	<u>ress</u> :			ATE G
	Christopher Beach, D.M.D.						>
	NEW Registered Office Address:					•	
	2051 Swan LN					_	
	Palm Harbor , FL	3468	3				
the ch agent was/w	limited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lifere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	vs of the reability	he gis co imi	State tered inpar	of Fl offici y, it iabili	orida, it is hereby co e and the business o is hereby confirmed ty company or as oth	flice of the registered that the change(s)
	3/12 / 3					Beach, Member	
	ture of a member or authorized representative of a member					Printed or typed name	
provis the ob	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ce to d perfoi d for it tereby	nct ma n C	in th ince thapt infirm	is cap of my er 60 n that	pacity. I further agre duties, and I am fan 5, F.S. Or, if this do the limited liability	ve to comply with the niliar with and accept cument is being filed company has been
Signati	are of Registered Agent						
	Division of Corporations. P.O. 1	30x 63	327	• Ta	.Haha	ssee, FL 32314	