## 111000225167

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## 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.

I. N	Name of the limited liability company: BLR ANESTHETICS LLC		
2. (a)	226 N. Nova Tel, Offwal Berch Fl Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u>_3</u> 2174(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	October 31, 2017 Date of filing/registration in Florida	4.	L17000225167 Document number
5. (a)	Registered Agent and Registered Office shown on the records of  United States Corporation Agent In  Registered Office Address (MUST BE FLORIDA STREET)  13302 Winding Oak Cart A  Tampa FL	C. ADDRESS) _ 336\Z	FILED  18 DEC -3 AM 8: 11  SFORE INSTALLATIONS TALLATIANSSEE, FLORIDA
the cha agent was/was/was/was/was/was/was/was/was/was/	NEW Registered Office Address:  226 N. Now. Rol. * 215  O(Word Beach Ft. imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of teles of organization or the operating agreement of the during of a member or authorized representative of a member 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 provide elsered achange in the registered office address. It	I the registered of ability company, of the limited liability climited liability company, and the limited liability company and the limited liability company and the liability company and liability compan	rice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.    Check How     Printed or typed name of signee
noujve	els reflect a change in the registered office address, I is d in writing of this change. Level How ne of Registered Agon	hereby confirm th	at the limited liability company has been