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TALLAHASSEE, FLORIDA

AUG 11 2018

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Premier Pulmonary and Critical Care PLLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Junaid Khan
Name of Person

Premier Pulmonary and Critical Care
Firm/Company

840 hamlet view Road
Address

Sidney Center NY 13839
City/State and Zip Code

Dr. Junaid Khan@gmail.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Junaid Khan at (314) 498 9390
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

**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. Name of the limited liability company: Premier Pulmonary and Critical Care PLLC

2. (a) 169 Riverside drive
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Binghamton NY
13839

(b) 840 hamlet view Rd
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

Sidney Center NY
13839

3. 07/19/18
Date of filing/registration in Florida

4. L18000174730
Document number

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

840 hamlet View Rd
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Sidney Center
FL 13839

(b) Chris Zehnder
Enter name of NEW Registered Agent and/or NEW Registered Office address:

113 E 13th St
NEW Registered Office Address:
Saint Cloud
FL 34769

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
x Change
Address

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.

[Signature]
Signature of a member or authorized representative of a member

Imrid Khan
Printed or typed name of signer

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