

L19000211274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

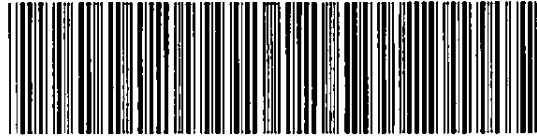
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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800438834308

Office of the Secretary of State

1000 Bankers Building, Tallahassee, FL 32301

Phone: (904) 498-0000 Fax: (904) 498-0001

Website: www.sos.fl.gov

2024 OCT 31 PM 3:45

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2024 OCT 31 AM 11:16

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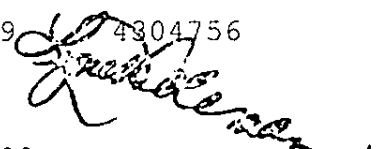
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CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 731309 4304756  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

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ORDER DATE : October 29, 2024  
ORDER TIME : 3:35 PM  
ORDER NO. : 731309-005  
CUSTOMER NO: 4304756  
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CHANGE OF AGENT

NAME: ANGEION GROUP INTERNATIONAL,  
LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Angeion Group International, LLC

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:

Daniel Miner

Name of Person

Angeion Group International, LLC

Firm/Company

460 E. Swedesford Road, Suite 2050

Address

Wayne, PA 19087

City/State and Zip Code

dan.miner@yourcase.works

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Miner

Name of Person

at ( 646 ) 315 - 1363

Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Angeion Group International, LLC

2. (a) 1650 ARCH STREET (b) 1650 ARCH STREET  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

SUITE 2210 SUITE 2210  
PHILADELPHIA, PA 19103 PHILADELPHIA, PA 19103

3. 08/19/2019 4. L19000211274  
Date of filing/registration in Florida Document number

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

11555 HERON BAY BOULEVARD  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
SUITE 200  
CORAL SPRINGS, FL 33076

(b) Corporation Service Company  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
1201 Hays Street  
NEW Registered Office Address:  
Tallahassee, FL 32301

FILED  
2024 OCT 31 PM 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Daniel Miner  
Signature of a member or authorized representative of a member

Daniel Miner  
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]  
Signature of Registered Agent