## L19000238515

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TALLAHASSEE, FLORIDA

C. BRUMBLEY
JUN 3 0 2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

•

ACCOUNT NO. : 12000000195							
REFERENCE : 778331 4805411							
AUTHORIZATION Smell Cleman							
COST LIMIT : \$25.00							
ORDER DATE : June 29, 2022							
ORDER TIME : 2:43 PM							
ORDER NO. : 778331-025							
CUSTOMER NO: 4805411							
CHANGE OF AGENT							
NAME: PREFERRED NURSE REGISTRY OF FLORIDA, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
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XX PLAIN STAMPED COPY							

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

## 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.

2. (a)	7301 W PALMETTO PARK RD		7301 W PALMETTO PARK RD				
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b)	•	=	mited liability company:	
	SUITE 208C		SUITE	208C			
	BOCA RATON, FL 33433		воса	RATON, FL 3343:	3		
	09/20/2019		L190002	238595			
3.	Date of filing/registration in Florida	4.		Document nur	ıber		
5. (a)	Registered Agent and Registered Office shown on the records o STANFIELD, PETER	the Flori	da Dept. of S	itate:			
	Registered Office Address (MUST BE FLORIDA STREET 7340 SW 48 ST, SUITE 107	ADDRE	SS)		2022 JUN SECRET		
	MIAMI	33155		<u> </u>	UN 29		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :  Corporation Service Company			_	M 9: 13 OF STATE SSEE, FL	ED	
	NEW Registered Office Address: 1201 Hays Street			<del>-</del>		,	
	Tallahassee . F	32301					
change agent v was/we the arti	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited leter authorized by an affirmative vote of the members cles of organization or the operating agreement of the	registe ability of of the li limited	red office a company, it mited liabi liability co	and the business o t is hereby contirn lity company or as ompany.	office of the regined that the chass otherwise prov	stered nge(s)	
	/s/ Joe Bonaccorsi  Signature of a member or authorized representative of a member			Joe Bonaccorsi, Authorized Person  Printed or typed name of signee			
I herei provisi the obl to mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I I in writing of this change.	ree to a perform d for in hereby	et in this ca nance of m Chapter 6 confirm tha			with the nd accept ging filed as been	

Grace E. Kirby. Asst. Vice President on behalf of Corporation Service Company
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00