L20000124107

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COVER LETTER ·

TO:	Registration Section Division of Corporations	. '
SUBJI	Dr wang Rubinstien and Associates PLLC	
JODA,		imited Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Office Cha	inge and fee(s) are submitted for filing.
Please	return all correspondence concerning this matte	er to the following:
Chelse	a Vandemermeele	
	Name of Person	
Dr Wa	nd Rubinstein and Associates	
	Firm/Company	
10075	Jog Rd Ste 301	
	Address	
Boynto	on Beach, FL 33437	
•	City/State and Zip Code	
chelsea	v@floridateeth.com	
E	-mail address: (to be used for future annual rep	ort notification)
For fur	ther information concerning this matter, please	call:
Scott C	rews at (_	330 951-9153
	Name of Person	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 amoun	nt:
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (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.

L Na	ame of the limited liability company: Dr Wang Rubinsto	ein and A	\ss	sociates PLLC
2. (a)	Chelsea Vandermemeele	(t	b))
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10075 Jog Rd Ste 301	_	_	10075 Jog Rd Ste 301
	Boynton Beach, FL 33437	_	-	Boynton Beach, FL 33437
	5/7/20		I.	L20000124107
3.	Date of filing/registration in Florida	4.	_	Document number
5. (a')	UNITED STATES CORPORATION AGENTS, INC.			
J. (u)	Registered Agent and Registered Office shown on the records of t	he Florid:	a D	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u>S)</u>	2020 NOV 23
	5575 S. SEMORAN BLVD. SUITE 36			VOV.
	ORLANDO, FL	32822	_	
71.5				SSEE D
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				ress: PEE 57
	Chelsea Vandermemeele			
	NEW Registered Office Address:			
	10075 Jog Rd Ste 301			
	Boynton Beac . FL	33437		
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law ture of a member or authorized representative of a member	s of the registere bility cof the limited l	ed om iité lial	d office and the business office of the registered inpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
·	'		. 2	••
provisi he ohl to merc	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	ee to act performa for in C ereby co	' in anc Cha onj	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed after that the limited liability company has been
Signatu	re of Registered Ngent			