

L21000025542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

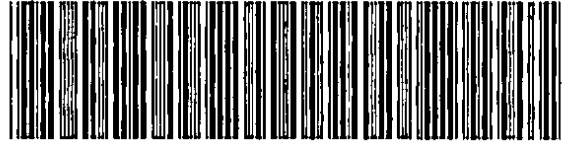
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

2/4/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Starkey Ranch Asset, 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:

Tom Vo

Name of Person

Firm/Company

6030 S. Rice Ave., Suite C

Address

Houston, TX 77081

City/State and Zip Code

admin@nutexhealth.com

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

For further information concerning this matter, please call:

Tom Vo

713
at (_____) _____

660-0557

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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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) 6030 S. Rice Ave., Suite C, Houston, TX 77081
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

(b) 6030 S. Rice Ave., Suite C, Houston, TX 77081
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

5. (a) Onier Villarreal
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
10525 Barabcoa Ct., Trinity, FL 34655

(b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Odessa, FL 33556

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SOUTH FLORIDA
TALLAHASSEE, FL

Signature of a member or authorized representative of a member _____ Tom Vo
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

INHS18 (2/14)