L22000014188

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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COVER LETTER

	gistration Section rision of Corporations						
SUBJECT	MED TECH CONSULTING GROUP LLC Name of Limited Liability Company						
SUBJECT							
Dear Sir or	Madam:						
The enclose	ed Registered Agent/Register	ed Office Change	and fee(s) are submitted for filing.				
Please retur	n all correspondence concerr	ning this matter to t	the following:				
KAITLIN D	OULOU						
	Name of Person	l					
MED TECH	CONSULTING GROUP LLC						
	Firm/Company						
7732 BLUE	QUAIL LANE						
	Address						
ORLANDO	, FL 32835						
	City/State and Zip (Code					
kait@medte	chsearchgroup.com						
E-mai	l address: (to be used for futu	ire annual report n	otification)				
For further	information concerning this r	natter, please call:					
KAITLIN D	oulou	727 at (455-7049				
	Name of Person		Area Code & Daytime Telephone Number				
Reg Div P.C	gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enc	closed is a check for the follo	owing amount:					
1 5	S25 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. N	lame of the limited liability company: MED TECH CO	ONSUL	ΓINO	G GROUP LLC				
2. (a)	7732 BLUE QUAIL LANE ORLANDO, FL 32835		(b)	7732 BLUE QUAIL LANE	BLUE QUAIL LANE ORLANDO, FL 32835			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailing address of	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	7732 BLUE QUAIL LANE			7732 BLUE QUAIL LANE				
	ORLANDO, FL 32835			ORLANDO, FL 32835				
	01/06/2022]	L22000014188				
3.	Date of filing/registration in Florida	4.	_	Document num	nber			
5. (a)	MUNIZZI LAW FIRM							
J. (u.	Registered Agent and Registered Office shown on the records of	of the Flo	rida I	Dept. of State:				
	MUNIZZI LAW FIRM							
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRI	ESS)					
	1120 NORTH RONALD REAGAN BLVD.				-11,	202		
	LONGWOOD, F	FL_32750	0		ALL/	2022 AUG	4 1	
(b)	BrewerLong PLLC				AHAS	Ŗ.		
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office	add	ress:	m m m	<u> </u>		
	BrewerLong PLLC					կ։ 25	وهتتو	
	NEW Registered Office Address:	·	·			-		
	407 WEKIVA SPRINGS ROAD SUITE 241							
	LONGWOOD , I	FL_32779	9					
chang agent was/w the ar	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited leaver authorized by an affirmative vote of the members ticles of organization or the operating agreement of the Drolshagen	aws of the regist iability of the elimite	the Stereo com limited lia	d office and the business on the pany, it is hereby confirm ted liability company or as	ffice of the led that the	registe change	ered e(s)	
	ature of a member or authorized representative of a member	-		Printed or typed n	name of signe	<u> </u>	·	
provis the ob to me notifie	eby accept the appointment as registered agent and assions of all statutes relative to the proper and completeligations of my position as registered agent as provided to the proper and completely reflect a change in the registered office address, and marketing of this change.	gree to de e perfoi led for i I hereby	act i rmai n Ci r coi	in this capacity. I further a nce of my duties, and I am hapter 605, F.S. Or, if this nfirm that the limited liabi	igree to con Jamiliar w document lity compai	nply w ith and is bein ny has	ith the l accept g filed been	
Signaf	GN-VIR-Egistered Agent							