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FEB 43 2023

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. 1	\\a	me of the limited liability company: Medtech Inte	ernati	onal Med	ical Systems	Llc			
2. (a) .		_ (1	o)					
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
		7901 4th St N STE 300	7901 4th	th St N STE 300					
		St. Petersburg FL 33702	St. Petersburg FL 33702						
		07/05/22		L22000	299878				
3.		Date of filing/registration in Florida	4.	ſ	Document numbe	Γ	· · · · · · · · · · · · · · · · · · ·	··· -···	
5. (5. (a)	TU CONTADOR EN MIAMI LLC							
`		Registered Agent and Registered Office shown on the records of the	a Dept. of State:						
		1946 TYLER STREET							
		Registered Office Address (MUST BE FLORIDA STREET A	រា						
(b)		HOLLYWOOD ,FL	33020)					
	Northwest Registered Agent LLC				÷				
		Enter name of NEW Registered Agent and/or NEW Registered (Office ad	dress:			2023		
		7901 4th St N				:	83J		
		NEW Registered Office Address:				`. 	22	Γ,	
		STE 300	- · · · · · · · · · · · · · · · · · · ·				PH	<u></u>	
		St. Petersburg	33702	2		RUBBI	PH 12: 19		
the c. agent was/	hai w we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabre agreement of the liabre agreement.	he regi bility co the lin	stered office a ompany, it is l nited liability	and the business of hereby confirmed company or as of	office of I that the	the reg	istered (s)	
		VT SVINTIV	Na	t Smith					
Sign	nati	ure of a member or authorized representative of a member			Printed or typed name	e of signee	:		
Thei	et.	ry accept the appointment as registered agent and agre	e to ac	t in this capac	city. I further agr	ee to co	mply w	ith the	

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.

Taylor Newman - Assistant Secretary
Signalure of Registered Agent