## L22000484792

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## COVER LETTER

Division of Corporations	
CAT EMED SERVICES LLC SUBJECT:	
Name of Lin	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fec(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Paul Verna	
Name of Person	<del></del>
Verna & Associates LLC	
Firm/Company	
105 Jessup Rd	
Address	
West Deptford New Jersey 08086	
City/State and Zip Code	<del></del>
llamb@verna.com	
E-mail address: (to be used for future annual repo	
For further information concerning this matter, please	call:
Linda Lamb	856 384-8400
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 Čentre 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)	

CONTRACTOR OF THE

## 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.	Na	me of the limited liability company:	ces LL	C			
2. (a	٠,١	CAT EMED Services LLC		(b) Vema d	& Associates		
۷. (۱	•)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(e) <u></u>	Mailing address of limited (Note: MAY BE POST		
		7945 Noremac Ave		105 Jessup Road			
		Miami Beach FL 33141	_	West Deptford NJ 08086			
		November 14, 2022		L22000484792			
3.		Date of filing/registration in Florida	4.		Document number		
5. (a)	ر د	Anthony Catapano					
٥. (	(a)	Registered Agent and Registered Office shown on the records of the	hc Flor	ida Dept. of S	State:	23	<u></u> ,
		Anthony Catapano				FEB	2.0
		Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)			2 8	SC 7.
		629 North Jefferson Ave					5.5
		Sarasota	34237	4237 <b>AH 6: 5</b>			
(b)		, FL			<del></del>	ؿ	
	b)	Anthony Catapano				51	<u> </u>
	٠,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	address:	<del></del>		
		Anthony Catapano					
		NEW Registered Office Address:					
		7945 Noremac Ave					
		Miami Beach , FL	33141				
char ager	ige it v	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 lia ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	vs of the contract of the limite the limited the lim	he State of ered office company, imited liab	and the business office on it is hereby confirmed the offity company or as othe company.	of the registe at the change	red e(s)
X_Si	gna	turo of a member or authorized representative of a member			Printed or typed name of	f signee	
the to m	visi obl ier fie	by accept the appointment as registered agent and agri- ons of all statutes relative to the proper and complete i igations of my position as registered agent as provided by reflect a change in the registered office address. I had in writing of this change.					
Jigi							