

12/14/23, 3:38 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L22000513217

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000426815 3)))



H230004268153ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : COMPUTERSHARE
 Account Number : 110432003053
 Phone : (561)694-8107
 Fax Number : (561)214-8442

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2023 DEC 14 AM 7:35

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE
MICHAEL'S MEDICAL DEPOT LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2023 DEC 14 AM 10:53

ALL INFORMATION
HEREIN IS UNCLASSIFIED
DATE 08-14-2010 BY 60322

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. Name of the limited liability company: Michael's Medical Depot LLC

2. (a) 3560 NW 120th Way (b) 3560 NW 120th Way
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Sunrise, FL 33323

Sunrise, FL 33323

12/6/2022 12:00:00 AM

L22000513217

3. Date of filing/registration in Florida 4. Document number

5. (a) LEGALINC CORPORATE SERVICES INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

476 Riverside Ave

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville, FL 32202

(b) Corporate Creations Network Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

801 US Highway 1

NEW Registered Office Address:

North Palm Beach, FL 33408

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Kristen Espinales

Kristen Espinales, Attorney-in-Fact

Signature of a member or authorized representative of a member

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.

Kristen Espinales

Kristen Espinales, Special Secretary

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

2023 DEC 14 AM 10:53

FILED