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## LLC REGISTERED AGENT CHANGE K2 MEDICAL RESEARCH MAITLAND LLC

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY 4 P ŧ

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	ame of the limited liability company:			
2. (a)	541 South Orlando Avenue	(	101 Sou b)	ithhall Lane
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	-,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 100		Ste 150	
	Maitland, FL 32751		Maitland	d. FL 32751
	01/19/2023		L2300002	22370
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Lesia Hise			
	Registered Agent and Registered Office shown on the record		a Dent of St	tate:
	101 Southhall Lane		a pept of st	
	101 Southhall Lanc Registered Office Address <u>(MUST BE FLORIDA STRE</u>			
(b)	101 Southhall Lanc Registered Office Address <u>(MUST BE FLORIDA STRE</u> Ste 150 Maitland	ET ADDRES		
(b)	101 Southhall Lanc Registered Office Address <u>(MUST BE FLORIDA STRI</u> Ste 150 Maitland	<u>et addres</u> , fl	<u></u>	
(b)	101 Southhall Lanc   Registered Office Address (MUST BE FLORIDA STRESS)   Ste 150   Maitland   Corporate Creations Network Inc.	<u>et addres</u> , fl	<u></u>	APPING 2024 JUL -9 SLORE LART TALLATINGSE
(b)	101 Southhall Lanc   Registered Office Address (MUST BE FLORIDA STRESS)   Ste 150   Maitland   Corporate Creations Network Inc.   Enter name of NEW Registered Agent and/or NEW Registered	<u>et addres</u> , fl	<u></u>	

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.

Lesia Hise

/s/ Lesia Hise Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

An Filt By: Ariana Turoski, Special Secretary

Signature of Registered Agent

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