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## LLC REGISTERED AGENT CHANGE ANOROCARE LLC

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## 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.

I. N	ame of the limited liability company:  Anorocare LLC		
2. (a)	7599 Park Boulevard	(b)	7599 Park Boulevard
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Suite 400	(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Suite 400
	Suite 400	_	Sinc 400
	Pinellas Park, FL 33781	_	Pinellas Park, FL 33781
		_	L 23000 307700
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Don B. Weinbren, Esq.		
J. (a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State:
	101 East Kennedy Boulevard, Suite 2700	· <b>-</b> ·	
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	~
	Tampa, F1.	33602	<del></del>
(b)	Anthony Ngo, DO		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:
	-		. <del></del>
	7599 Park Boulevard		<u></u>
	NEW Registered Office Address:		
	Suite 400		
	Pinellas Park	33781	
	, FL		<del></del>
change agent	limited liability company is not organized under the law e 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 o ration or the operating agreement of the	registered bility con f the limit limited lia	I office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
Signa	nure of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to no. ਤੰ	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete pligations of my position as registered agent as provided hange in the registered office address, I have a fithis change.	performa	nce of my duties, and I am Iamiliar with and accept