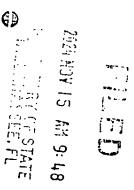
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(Requestor's Name)							
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COVER LETTER

TO: Registration Section Division of Corporations	
Butterfield Neuropsychology, PLLC SUBJECT:	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
London Butterfield, PhD	
Name of Person	
Butterfield Neuropsychology, PLLC	
Firm/Company	
1901 Ulmerton Rd, Suite 625-308	
Address	
Clearwater, Fl. 33762	
City/State and Zip Code	
drlondonbutterfield@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
London Butterfield	321 277-5422 at (
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 Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following am	count:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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. N	ame of the limited liability company: Butterfield Neuro	psycho	ology, PLL	С				
2. (a)	1901 Lilmerton Rd		(b) 1901 Ulmerton Rd					
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		iling address of			-
	Suite 625-308		Suite	625-308	3			
	Clearwater, FL 33762	_	Cleary	water, H	L 33762			
	11/5/2024		1.24000	1469115				
3.	Date of filing/registration in Florida	4.	<u></u>	Do	ocument nur	mber		
5. (a)	London C Butterfield							
v. (u)	Registered Agent and Registered Office shown on the records of 422 23rd Ave N	the Flo	rida Dept. of	f State:				
	Registered Office Address	<u>ADDR</u>	ESS)					
	St Petersburg , FI	3370-	ļ					
(b)	London C Butterfield							
(0)	Enter name of NEW Registered Agent and/or NEW Registered	1 Office	address:					
	1901 Ulmerton Rd							
	NEW Registered Office Address:	-						
	Suite 625-308							
	Clearwater , FI	33762	2					
chang agent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the organization or the operating agreement of the	regist ability of the limite	ered offic company limited lia	e and the second to the second	he business ereby confir ompany or a try.	office of the med that th	e registe e chang	ered se(s)
Sign	ature of a member or authorized representative of a member		·		rinted or typed	name of sign	oc oc	
I here provis the ob to mei	eby accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I will in writing of this change.	ree to o perfoi d for i hereby	act in this mance of n Chapter o confirm t	capaci.	tv. I further	oeree to c	omole w	ith the laccepting filed been
Signati	ure of Registered Agent					٦. ١	-	703