M00000000274

| (Requestor's Name) | | | | |
|---|--------------------|-----------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | · | | |
| | | | | |
| | | | | |

Office Use Only



500299051435

MAY 1 8 2017

S. YOUNG

05/17/17--01017--008 **25.00



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel O'Hayer rachel.ohayer@cscglobal.com

Date: May 15, 2017

Order#: 623627-189

Re: THE SARASOTA ENDOSCOPY ASC, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Rachel O'Hayer

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

SEGRETARY OF STATE TAPLAHASSEE, FLORIDA

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: THE SARASOTA | A ENDO | SCOPY ASC, LLC |
|----------------|-------------------------|--|--|--|
| 2. | (a) | 1A BURTON HILLS BLVD | _ (b) | , |
| | | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | | | _ | |
| | | NASHVILLE, TN 37215 | _ | NASHVILLE, TN 37215 |
| | | 02/11/2000 | | M00000000274 |
| 3. | | Date of filing/registration in Florida | 4. | Document number |
| 5. | (a) | NRAI SERVICES, INC | | |
| | | Registered Agent and Registered Office shown on the records of the | he Florida | Dept, of State: |
| | | 1200 SOUTH PINE ISLAND ROAD | | |
| | | Registered Office Address (MUST BE FLORIDA STREET A | DDRESS) | THE CORE |
| | | | | HAY |
| | | Plantation FL. | 33324 | 7 888 |
| | | , 5 2 | | 7 |
| | (b) | Corporation Service Company | | |
| | | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u> | Office add | dress: |
| | | 4004 II 014 | | |
| | | 1201 Hays Street NEW Registered Office Address: | <u> </u> | |
| | | | | |
| | | Tallahassee , FL | 32301 | ···· |
| th ag wa | e cha ent w as/we | mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liaker authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of | the regist bility cor f the limi | stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in |
| | Ciana | ure of a member or authorized representative of a member | Jill C | Cilmi, Authorized Person Printed or typed name of signee |
| | 0 | () | na to aat | |
| pr th to | ovisi e obli mere | by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have in this change. | performa I för in C | ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed |
| Si | ignatu | re of Registered Agent Corporation Service Company | BY: Gr | race E. Kirby, Assistant Vice President |