

MO1000000628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

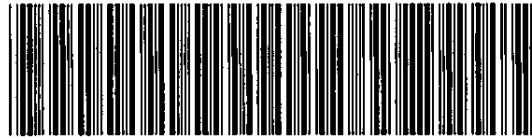
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700260896837

06/09/14--01017--017 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 JUN -9 PM 1:08

LLC RA/RO Change

JUL 02 2014
T. CARTER

767

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUNRISE OPHTHALMOLOGY ASC, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEVEN A. WEINBERG, ESQUIRE

Name of Person

FRANK, WEINBERG & BLACK, P.L.

Firm/Company

7805 S.W. 6TH COURT

Address

PLANTATION, FLORIDA 33324

City/State and Zip Code

SWEINBERG&FWBLAW.NET - KMORO@FWBLAW.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN A. WEINBERG,ESQ at 954 474-8000

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: SUNRISE OPHTHALMOLOGY ASC, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

7805 SW 6 COURT
PLANTATION, FL 33324

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

7805 SW 6 COURT
PLANTATION, FL 33324

March 22, 2001

M01000000628

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 Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 South Pine Island Road

Plantation, FL 33324

(b) Steven A. Weinberg, Esq.

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

Frank, Weinberg & Black, P.L.

NEW Registered Office Address:

7805 SW 6th Court

Plantation, FL 33324

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
14 JUN -9 PM 1:08

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.

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.

Steven A. Weinberg

Signature of Registered Agent