Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Pax Number : (850)617-6383

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Account Name : CORPORATE CREATIONS INTERNATIONAL

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LLC REGISTERED AGENT CHANGE LEAGUE MEDICAL CONCEPTS, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

APR 29 2014

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: LEAG	UE MEDICAL CONCEPTS, LLC		
2. (a) Principal office address of the limited liability comapny:	3027 MARINA BAY DRIVE, SUITE 110	∓ल 😝	
(Note: MUST BE STREET ADDRESS)	LEAGUE CITY TX 77573		
(b) Mailing address of limited liability company.	3027 MARINA BAY DRIVE, SUITE 110	PR 28	
(Note: MAY BE POST OFFICE BOX)	LEAGUE CITY TX 77573	THE P	i
3/11/2015	M15000001889	- O	į.
3. Date of filing/registration in Florida5.(a) Registered Agent and Registered Office shown	4. Document number on the records of the Florida Dept. of Sta	24 0	
Registered Agent:	C T CORPORATION SYSTEM		
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION FL 33324		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW R</u>	legistered Office address;		
NEW Registered Agent:	Corporate Creations Network Inc.		
NEW Registered Office Address:	11380 Prosperity Farms Road #221E		
(MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gardons Fl. 33410		
If the limited liability company is not organized under the laws or changes are made, the Florida street address of the registered identical. Or, in the case of a Florida limited liability company an affirmative vote of the members of the limited liability company the operating agreement of the limited liability company. (Signatural of a member or authorized representative of a member)	d office and the business office of the registered as the it is hereby confirmed that the change(s) was/we	gent will be ere authorized l	
by Jessica Morales as attorney-in-fact (Printed or Typed name of signee)			
I hereby accept the appointment as registered agent and agree of all statutes relative to the proper and complete performance my post on as registered agent as provided for in Chapter 605 in the reassered office address. I hereby confirm that the limite	of my duties, and I am familiar with and accept to F.S. Or, if this document is being filed to merely a liability company has been notified in writing o	the obligations y reflect a chan	of
(Signatua) of Registered Agent)	Box 6327, Tallahassee, FL 32314		
INHS18(10/99)	,		
Corporate Creations International inc.			
11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107			