

M16 00000 6198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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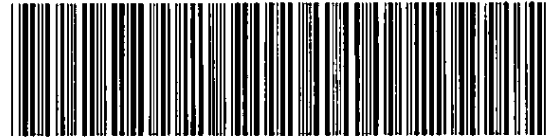
(Business Entity Name)

(Document Number)

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MAY 29 2018



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: 5/24/2018

Account#: 120000000088

Name: Merritt Knickle

Reference #: M100008

Entity Name: NEURO AND ORTHOPEDIC MONITORING AND TESTING ASSOCIATES, PLLC, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25

Signature: WAY

• CORPORATE HQ
COGENCY GLOBAL INC
10 E 40 ST, 10 FL
NY, NY 10016
800.221.0102
+1.212.947.7200

• EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REGISTRY NO 0727
6 BEVIS MARKS, 11 FL
LONDON EC3A 7BA
+44 (0)20.3786.1090

• ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
INFINITUS PLAZA, 12 FL
199 DES VOEUX RD CENTRAL
HONG KONG
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TALLAHASSEE, FL 32301
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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.

1. Name of the limited liability company: NEURO AND ORTHOPEDIC MONITORING AND TESTING ASSOCIATES, PLLC, LLC

2. (a) <u>915 BROADWAY</u> Principal office address of limited liability company: <u>(Note: MUST BE STREET ADDRESS)</u> <u>SUITE 1100</u> <u>NEW YORK, NY 10010</u>	(b) <u>915 BROADWAY</u> Mailing address of limited liability company: <u>(Note: MAY BE POST OFFICE BOX)</u> <u>SUITE 1100</u> <u>NEW YORK, NY 10010</u>
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3. <u>08/03/2016</u> Date of filing/registration in Florida	4. <u>M16000006198</u> Document number
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5. (a) CORPORATION SERVICE COMPANY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1201 HAYS STREET
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
TALLAHASSEE, FL 32301-2525

(b) COGENCY GLOBAL INC.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4
NEW Registered Office Address:
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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	_____ Soe Aung, M.D. Printed or typed name of signer
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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.

Matthew Kunkle, Asst. Secretary
Signature of Registered Agent