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(Re	questor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	I2000000	)195			
	REFERENCE	:	364331	7848964			
	AUTHORIZATION	:					
	COST LIMIT	:	\$ 25	Cenan			
ORDER DATE :	January 6, 2022						
ORDER TIME :	9:09 AM						
ORDER NO. :	364331-015						
CUSTOMER NO:	7848964						
CHANGE OF AGENT							
NAME:	AUDPRACTICE G	ROU	P, LLC				
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FI	ING:			
CERTII	FIED COPY						
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COMMA CONT. DED CO.	ar and accordence to a different	د					
CONTACT PERSON	N: Alexxis Weila:	HCI					

EXAMINER'S INITIALS:

## 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:  AudPractice G	roup, LLC					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of (Note: MAY b		-	
	149 Plantation Ridge Dr., Suite 140		149 Planta	ation Ridge D	r., Suite	140	
	Mooresville, NC 28117		Mooresvil	le, NC 28117			
	12/18/2017	1	M17000010	0721			
3.	Date of filing/registration in Florida		<u>-</u>	Document nu	ınber		<u></u>
<i>5</i> ()							
5. (a)	Registered Agent and Registered Office shown on the records of Joel Parker	of the Florida	Dept, of State	- 2:	17. 10.: :	2022 JAN	- 5.84
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)			−6; ~ :	. 1724 - 1724 - 1724	- t 
	5 Harvard Circle Suite 102 Suite G				:	9	1
	West Palm Beach	33409	<u>-</u> .	-		E	, <u>c</u>
				-	•	ထ္ ယ	
(b)				-		0	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office add	ress:				
	Corporation Service Company						
	NEW Registered Office Address:			-			
	1201 Hays Street			_			
	Tallahassee	32301					
change agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the DiRenzo	e registered iability con of the limit e limited lia	l office and ipany, it is ed liability	I the business hereby confir company or	office o	f the re it the cl	gistered nange(s)
Sign	ature of a member of authorized representative of a member			Printed or typed	name of	signee	
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	gree to act i e performar ed for in CI hereby con	n this capa ice of my d apter 605, firm that t	icity   I further	: aoree 1	o come	oly with the and accept being filed has been
(() () Signatu	ure of Registered Agent						