

MIB000010366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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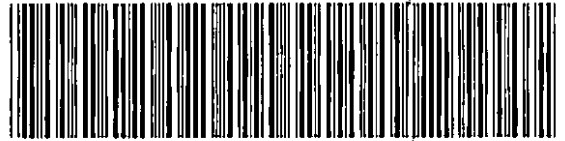
(Business Entity Name)

(Document Number)

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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 02/01/2019

Name: Jennifer Bialowas

Reference #: 1042128

Entity Name: DENTAL TEMPS STAFFING SOLUTIONS, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☒ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other

Authorized Amount: 25.00

Signature:

• CORPORATE HQ
COGENCY GLOBAL INC
10 E 40TH ST, 10TH FL
NY, NY 10016
D: +1.212.947.7200
P: 800.271.0102
F: 800.944.6607

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+44 (0)20.3961.3080

• ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
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103 LEIGHTON RD, CAUSEWAY BAY
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Account#: I20000000088

Date: 02/01/2019

Name: Jennifer Bialowas

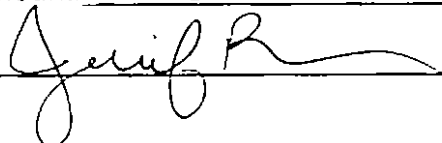
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

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: DENTAL TEMPS STAFFING SOLUTIONS, LLC
2. (a) 3204 SMOKEY POINT DR., SUITE 206
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
ARLINGTON, WA 98223
- (b) 3204 SMOKEY POINT DR., SUITE 206
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
ARLINGTON, WA 98223
3. November 19, 2018
Date of filing/registration in Florida
4. M18000010366
Document number
5. (a) REGISTERED AGENTS INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3030 N. ROCKY POINT DR.
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
STE 150A
TAMPA, FL 33607
- (b) COGENCY GLOBAL INC.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
115 North Calhoun St., Suite 4
NEW Registered Office Address:
Suite 4
Tallahassee, FL 32301

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.

Brett Cole
Signature of a member or authorized representative of a member

Brett Cole

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.

Tim Mayville
Signature of Registered Agent

Tim Mayville, Assistant Secretary

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

FILING FEE: \$25.00