17/190000000798

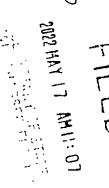
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
5 Alexandra
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600387768496

RA ERO Charge



OLZ HAT I / PH 3: 30

RECEIVED

A RAMSEY MAY 18 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: I2000000	195	
	REFERENCE	: 663911	7573497	
	AUTHORIZATION	Spull Old	man	
	COST LIMIT	: \$ 25.00		 _
ORDER DATE :	May 7, 2022			
ORDER TIME :	1:27 PM			
ORDER NO. :	663911-333			
CUSTOMER NO:	7573497			
	CHANGE OF A	<u>GENT</u>		• • • •
NAME:	KIDNEY CENTER LLC	OF PLANT CIT	Ϋ́Υ,	
PLEASE RETURN	THE FOLLOWING AS	PROOF OF FIL	JING:	
	FIED COPY STAMPED COPY			
CONTACT PERSON	N: Alexxis Weila	nd		

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.

L. Na	ame of the limited liability company: KIDNEY CENTI	ER OF PLANT CI	TY, LLC	
2. (a)	500 Cummings Center	(b) 500 Cummings Center		
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(")	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 6550	Suite 6	5550	
	Beverly, MA 01915	Beverly, MA 01915		
	01/23/2019	M19000	0000798	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
J. (u)	Registered Agent and Registered Office shown on the records of CT CORPORATION SYSTEM	the Florida Dept. of	State:	
	Registered Office Address (MUST BE FLORIDA STREET) 1200 SOUTH PINE ISLAND ROAD	ADDRESS)	20221	
	PLANTATION	33324	TICEL TO THE	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	l Office address:	MEZHATI ALLI: 07	
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee , Ft.	32301		
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the organization or the operating agreement of the	registered office ability company, of the limited liab	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in	
	Lee & Gomes	Jill Cilmi, Au	ithorized Person	
-	ture of a member or authorized representative of a member		Printed or typed name of signee	
provisi the obl to merc	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I is din writing of this change.	ree to act in this c performance of n d for in Chapter (hereby confirm th	capacity. I further agree to comply with the ny duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed out the limited liability company has been	
	Drace C. Kubly	Grace E. K	irby, Asst, Vice President	
Signatu	re of Registered Agent			