

2/24/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

M1900006033

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : UNITED AGENT GROUP INC.
Account Number : 120160000086
Phone : (561)508-5033
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE
COMPREHENSIVE HEALTH SERVICES, LLC**

Certificate of Status	0
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Corporate Filing Menu

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SALY

FEB 26 2021

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:

Comprehensive Health Services, LLC

2. (a) 8600 ASTRONAUT BLVD

(b) 8600 ASTRONAUT BLVD

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

CAPE CANAVERAL, FL 32920

CAPE CANAVERAL, FL 32920

3. 06/20/2019

4. M19000006033

Date of filing/registration in Florida

Document number

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

(b) United Agent Group Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:


801 US Highway 1

NEW Registered Office Address:

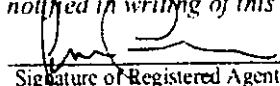
North Palm Beach, FL 33408

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TALLAHASSEE, FLORIDA

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

Jenisa Irizarry, Special Secretary
Printed or typed name of signer


Signature of Registered Agent

Jenisa Irizarry, Special Secretary

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.