Division of Corporations



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## LLC REGISTERED AGENT CHANGE EH HOSPICE OF SOUTHERN FLORIDA, LLC

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AUG 1 0 2023

## 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:	F SOUTHE	RN FLOR	IDA, LLC			
2. (a)	6688 N. CENTRAL EXPRESSWAY, SUITE 1300	(b)	6688 N. C	N. CENTRAL EXPRESSWAY, SUITE 1300			
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	,	Mailing address of lin			
	DALLAS, TX 75206	<del></del>	DALLAS.	. TX 75206		· <u> </u>	
	03/08/2023	<u> </u>	123000003	3188			
3. 5. (a)	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.		Document number	er		
e. taj	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	 e:					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)					
	PLANTATION, FI	L 33324		-			
(0)	United Agent Group Inc.			<u>.</u>		2023 AUG -9	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addi	[677:		盖門	G	<u> </u>
	801 US Highway I						JEN STON
	NEW Registered Office Address:			_		AM 7: 3	0
	North Palm Beach, Fl	L		_	- [ [ ] ]	<u> </u>	
change agent v was/we	imited 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 litere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	e registered lability corr of the limit	l office and npany, it is ed liability	d the business offi s hereby confirmed y company or as o	ce of the	ne regi ne cha	istered inge(s)
	at	Kevin Du	teau, Attor	ney-in-Fact on beha	lf of Dy	dan C.	Black, Manage
Signa	ture of a member or authorized representative of a member			Printed or typed nam	ne of sign	iec	<u>.</u>
provisi the obl to mero notified	by accept the appointment as registered agent and agi ions 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.	r performan	ice of my o	duties, and I am fa	ımiliar	with a	ınd accent
	Oct Kevin Duteau, Sp	pecial Seci	retary				
Signatu	re of Registered Agent						