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Division of Corporations



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LLC REGISTERED AGENT CHANGE MEDGEVITY HEALTH, LLC



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K. SALY

JUN 26 2024

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.

I. Na	ame of the limited liability company: MEDGevity He	ealth, LL	С			
2. (a)	5 COUNTRY CLUB ROAD	_	(b) 5 COUNTRY CLUB ROAD			
2. (4)	. 4. Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		nited liability company: POST OFFICE BOX)	
	KEY LARGO, FL 33037		KEY LAF	RGO, FL 33037		
	17.4 11/01/2023		M2300001	4011		_
3.	Date of filing/registration in Florida	4.	distance in the second	Document numb	er	
5. (a)	C-T CORPORATION SYSTEM					
	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	of the Flo	rida Dept. of Sta	te:		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRI	ESS)	_		
	PLANTATION , I	FL	I	_	2024 JUN 25 JALLAHASSI	-
(b) ⁻	Corporate Creations Network Inc.			_	JUN 25	
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office	address:		(7.1)	Π
."	801/US Highway 1			_	AM 4: 16	
	NEW Registered Office Address:				16 16	
	· · · · · · · · · · · · · · · · · · ·			_		
	North Palm Beach	FL_33408		.		
change agent v was/we	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the street in the contract of t	he regist liability s of the l	ered office ar company, it i limited liabili	nd the business off is hereby confirme ty company or as o	fice of the registered ed that the change(s)	ne
,	at	, K	Cevin Duteau. A	Attorney-in-Fact		
Signa	ture of a member or authorized representative of a member			Printed or typed nar	me of signee	
provisi the obl to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.	gree to d te perfor led for i I hereby	ict in this cap mance of my n Chapter 60, confirm that	acity. I further ag duties, and I am J 5, F.S. Or, if this i the limited liabili	gree to comply with the amiliar with and acce document is being file ty company has been	e pt d
11.00	Kevin Duteau, Spe	ecial	Secretary			
Signatu	re of Registered Agent					