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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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REGISTERED AGENT CHANGE SOCIETY OF ROBOTIC SURGERY, INC

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Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, t ized under the laws of the State of <mark>Florida</mark> cred agent, or both, in the State of Florida.	his
L. The name of	the corporation: Society of Robotic S	Surgery, Inc	
	office address: 7901 4th St N STE 3		
	address (if different): 7901 4th St N S		
4. Date of inco	poration/qualification; 03/13/2009	Document number: <u>N09000002579</u>]
	d street address of the current registered a rtment of State: (If resigned, enter resigne		
	INCORP SERVICES, INC.		202
	17888 67TH COURT NORT	S, INC. 28 24 25 25 25 25 25 25 25 25 25 25 25 25 25	
	LOXAHATCHEE, FL 33470		+
6. The name an (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	AH 8: 34
	Northwest Registered Agen	t LLC	3 4
	7901 4th St N STE 300		
	РО, Вох St. Petersburg FL 33702	NOT acceptable	
The street addras changed wil	ess of its registered office and the street l be identical.	address of the business office of its register	ed agent,
Such change wanthorized by t	as authorized by resolution duly adopted he board, or the corporation has been no	by its board of directors or by an officer so titled in writing of the change.)
Sue (Y Bullivan ire of an ufficer or director	Sue O'Sullivan, Administrative Dire	ector
I hereby accep. I further agree of my duties, as document is be	t the approintment as registered agent an	••	formance Or, if this n that the
77-N-		1/3/23	
\$i ₁	gnature of Registered Agent	Date	
If signing on bo	chalf of an entity:		
Taylor Nev			
,	"yped or Printed Name * * * ELLING UP	E. 625 00 * * *	
	* * * FILING FE	E. 300.00 1	

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