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Account Number : 120230000143 Phone : (888)314-3998 Fax Number : (518)514-1288

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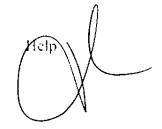
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REGISTERED AGENT CHANGE

DICAL VILLAGE MAITLAND CONDOMINIUM ASSOCIATION.

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To:

(((1230003513913)))

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

statement of cha	mge is submitted for a corporatio	617,0302, 607,1308, or 617,1308, Florida 8 on organized under the laws of the State of $\frac{1}{2}$ or registered agent, or both, in the State of F	Torida			
1. The name of	the cornection. MEDICAL VILL	AGE MAITLAND CONDOMINIUM ASSOC	TATION, INC.			
2. The principal	office address: e/o Physicians Rea	alty L.P. 309 N. Water Street Suite 700 Milwau	ikee, WI 53202			
3. The mailing a	address (if different):					
4. Date of incorp	poration/qualification: 04/29/201	5 Document number: N1500000	04376			
	d street address of the current regiment of State: (If resigned, ente	istered agent and registered office on file witresigned)	th the			
	UNIVERSAL REGISTERED AC	GENTS, INC.				
	1317 CALIFORNIA ST.					
	TALLAHASSEE, FL 32304		_			
6. The name and (ifchanged):	d street address of the new registe	ered agent (if changed) and/or registered off	2023			
	SPI AGENT SOLUTIONS, INC.		2023 OCT -			
	1540 GLENWAY DR		17-6 17-6			
	TALLAHASSEE, FL 32301	P.O Box NOT acceptable	AMIO:			
The street addreas changed will	ess of its registered office and the identical.	ne street address of the business office of its	s registered G ent.			
Such change wa	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an been notified in writing of the change.	officer so			
Solm T T		John T. Thomas	John T. Thomas			
-	ire of an officer or director	Printed or typed name and in	tle			
I further agree of my duties, ar dociment is bei	to comply with the provisions of	agent and agree to act in this capacity, if all statutes relative to the proper and com title obligation of my position as registered age in the registered office address. Therek change.	plete performance Lagent. Or, if this by confirm that the			
~=du-1+0	mature of Registered Agent	10/5/2023				
Sig	mature of Registered Agent	Date				
If signing on be	chalf of an entity:					
Julianne L. Bass	·····	<u></u>				
ľ	yped or Printed Name	INC PFF - \$35 mm * * *				
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