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2018 AUG 13 AH ID: OO SECRETARY OF STATE

R. WHITE
AUG 1 4 2018

COVER LETTER

Amendment Section TO: Division of Corporations

SUBJECT: Ocala Heart Institute Foundation, Inc.

Name of Corporation

DOCUMENT NUMBER: N35942

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Treva D. Widdis

Name of Contact Person

Ocala Heart Institute Foundation, Inc.

Firm/Company

700 Doctors Court

Address

Leesburg, Florida 34748

City/State and Zip Code

twiddis@ocalaheart.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Treva D. Widdis

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of I	Florida	-
1. The name of t	the corporation: Ocala Heart Institute Foundation, Inc.		
2. The principal	office address: 700 Doctors Court, Leesburg, FL 34748		
			_
3. The mailing a	address (if different): Same as above		
4. Date of incor	poration/qualification: 12/22/1989 Document number: N3594	42	
5. The name and	d street address of the current registered agent and registered office on file wrtment of State: (If resigned, enter resigned)	vith the	
	Mead, Robert W., Jr.	_	
	420 S. Orange Ave, Suite 700	- 20: - 3E:	
	Orlando, Florida 32801	2018 AUG 13 SECRETARY	-17
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	ν ·	m
	Treva D. Widdis	AN 10: 00 OF STATE SEE, FL	O
	Ocala Heart Institute Foundation, Inc.	- THE 00	
	700 Doctors Court, Leesburg, FL 34748		
The street addras changed will	ess of its registered office and the street address of the business office of it be identical.	its registered age	nt.
Such change wauthorized by	as authorized by resolution duly adopted by its board of directors or by an he board, of the corporation has been notified in writing of the change.		
Signati	The Duane Cook, Officer Printed or typed name and ti	iile	-
-1 furthèr agrée -performance of	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and confine duies, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered official that the corporation has been notified in writing of this change.	ice adaress, 1	
Sign	mature of Registered Agent U8 07 20	<u> 10 _</u>	-
If signing on be	chalf of an entity:		
Treva	D. Middis Exped or Printed Name		

* * * FILING FEE: \$35.00 * * *