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Division of Corporations

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## REGISTERED AGENT CHANGE SERGIO BADEL MD, P.A.

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi, r to change its registered office or register	zed under the laws of the State of Flori	da
1. The name of (	the corporation: Sergio Badel MD, P.	Α.	
2. The principal	office address: 5411 N University Dri	ve 203, Parkland FL 33076	
3. The mailing a	ddress (if different): 7901 4th St N ST	TE 300 St. Petersburg FL 3370.	2
4. Date of incorp	poration/qualification: 03/13/08	Document number: P0800002	6826
	I street address of the current registered ag tment of State: (If resigned, enter resigned		ne
	BADEL, SERGIO		20
	7957 N University Drive Suit	e 255	2022 DEC
	Parkland. FL 33067		8-3
6. The name and (if changed):	I street address of the new registered agent	t (if changed) and /or registered office	AM 8:3
	Northwest Registered Agent	LLC	7: <u>a</u>
	7901 4th St N STE 300		
	St. Petersburg FL 33702	NOT acceptable	
The street addreas changed will	ess of its registered office and the street a be identical.	ddress of the business office of its re	gistered agent.
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an offitied in writing of the change.	cer so
Serg	io Badel re of an officer or director	Sergio Badel, President	
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and to comply with the provisions of all statu d I am jamiliar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	l agree to act in this capacity, tes relative to the proper and comple gation of my position as registered ag registered office address, I hereby of	te performance gent. Or, if this onfirm that the
Ton Ge	ove_	12/8/2022	
Sig	nature of Registered Agent	Date	
	half of an entity:		
Tom Glove			
Т	sped or Printed Name	In 1034 00 4 4 4	
	* * * FILING FE	r: 505.00 ° ° °	