7/31/24, 12:11 PM

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000258102 3)))



H240002581023ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

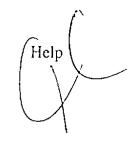
Email .	Address:						_
---------	----------	--	--	--	--	--	---

REGISTERED AGENT CHANGE OSF NEBRASKA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	inge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, n organized under the laws of the State of Florida	. this
		r registered agent, or both, in the State of Florida.	
	the corporation: OSF NEBRASKA		
2. The principal	office address: 2202 N WEST SHO	ORE BLVD., 5TH FLOOR, TAMPA, FL 33607	
3. The mailing a	ddress (if different):		
4. Date of incoη	poration/qualification: 11/12/2009	Document number: P09000093256	
	I street address of the current regit tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	20.
	Kelly Lefferts	•	° ال 24
	2202 N West Shore Blvd., 5th Flo	or	2024 JUL 3 I AH
	Tampa, FI 33607		AH.
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or registered office	9: 30
	United Agent Group Inc.		
	801 US Highway 1	-	
		P.O. Box NOT acceptable	
	North Palm Beach, FL 33408		
The street addre	ess of its registered office and the be identical.	e street address of the business office of its registe	ered agent,
Such change was authorized by th	is authorized by resolution duly are board, or the corporation has be	adopted by its board of directors or by an officer open notified in writing of the change.	so
Adia 7	Nyles	Adia Myles, Attorney-in-Fact	
	of an officer or director	Printed or typed name and title	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered as ocomply with the provisions of d I am familiar with and accept a chang been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and complete po the obligation of my position as registered agent, ge in the registered office address, I hereby confi change.	erformance Or, if this rm that the
Adia W	Lyles Sature of Registered Agent	7/31/2024	
Sig	ature of Registered Agent	Date	
If signing on be	half of an entity:		
Adia Myles, Spec	cial Secretary	_	
Ty	ped or Printed Name	_	

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