

P10000041662

Florida Department of State
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
STEPHEN CULP CARDIOLOGY, P.A.**

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TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Stephen Culp Cardiology, P.A.
2. The principal office address: 3830 Bee Ridge Road, Suite 201, Sarasota, Florida 34233
3. The mailing address (if different): P.O. Box 49434, Sarasota, Florida 34230

4. Date of incorporation/qualification: 05/12/2010 Document number: P10000041662

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jenifer S. Schembri

240 S. Pineapple Ave., 10th Floor

Sarasota, Florida 34236

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Erin Smith Aebel, Esq.

c/o Shumaker, Loop & Kendrick, LLP

101 E. Kennedy Blvd., Suite 2800

P.O. Box NOT acceptable

Tampa, Florida 33602

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

SAC
Signature of an officer or director

Stephen C. Culp, as President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Erin Smith Aebel

Signature of Registered Agent

4/6/11
Date

If signing on behalf of an entity:

Typed or Printed Name

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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