

P160000039642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

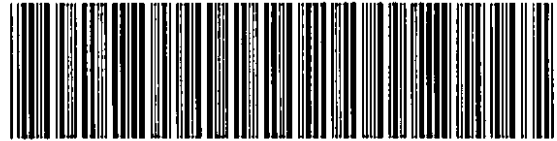
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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UNISEARCH<sub>inc.</sub>

Global Solutions for Corporate and Financial Compliance

2 JUL 2010  
SECRETARY OF  
DIVISION OF CORPORATIONS  
2010 JUL 23 AM 11:54

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Subject:	LADY LAKE SMILES DENTISTRY, PA
Form(s) Enclosed:	Statement of change of Registered Office or Registered Agent or Both for Corporations (2 copies)
Amount of check enclosed:	\$35.00, <i>please issue a receipt</i> <i>Florida Department of State</i>
Return Via:	Regular mail
Filing Method:	ROUTINE

If you have any questions, or if you cannot process this request for any reason, please do not hesitate to contact me at the number listed below.

Thanks for your help! ☺

**REF: COA**

**Please return to:**

**Shauntee Burgess**

**Unisearch, Inc.**

325 13<sup>th</sup> Street NE, Suite 404

Salem, OR 97301

Direct: 971-239-5579

Office: 800-554-3113 Ext 131

Fax: (800) 554-3114

**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: LADY LAKE SMILES DENTISTRY, PA
2. The principal office address: ATTN: LEGAL DEPT.  
17000 RED HILL AVENUE, IRVINE, CA 92614
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/06/2016 Document number: P16000039642

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)

UNISEARCH, INC.

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

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

UNISEARCH, INC.

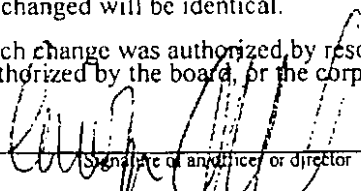
155 OFFICE PLAZA DRIVE

P.O. Box NOT acceptable

TALLAHASSEE, FL 32301

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

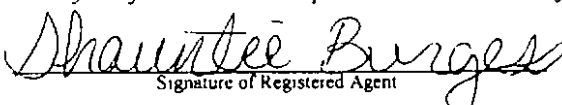
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
(Signature of officer or director)

Carolyn G. Ghazal, D.D.S., Secretary

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.*

  
\_\_\_\_\_  
Signature of Registered Agent

July 20, 2018  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

SHAUNTEE BURGESS, Asst. Secretary  
\_\_\_\_\_  
Typed or Printed Name

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

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

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