## P17000058058

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(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phon	e #)		
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PICK-UP	WAIT	MAIL		
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Certified Copies	Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:			
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Office Use Only



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A. BUTLER

JUL 26 2022

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

NONA DENTISTS PA				
SUBJECT: NONA DENTISTS, PA Name of Corporation	<del></del>			
DOCUMENT NUMBER: P17000058058				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this mat	ter to the following:			
JOELLE CHURIK				
Name of Contact Person				
UNISEARCH, INC.				
Firm/Company	<del></del>			
1990 MAIN STREET, STE 750-709				
Address	<del></del>			
SARASOTA, FL 34236	_			
City/State and Zip Code	<del></del>			
JOELLE.CHURIK@UNISEARC	H.COM			
E-mail address: (to be used for future annual rep	ort notification)			
For further information concerning this matter, pleas	ee call:			
JOELLE CHURIK	31 (888 )617-4478			
Name of Contact Person	at (888 )617-4478  Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Dep	artment of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

CR2E045 (04/13)

## 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, o ange is submitted for a corporation organized under the er to change its registered office or registered agent, or	laws of the State of FLC	RIDA	
1. The name of t	the corporation: NONA DENTISTS, PA			
	office address: 12711 NORCOOSSEE RD., BLDG B, ST	E 100, ORLANDO, FL 32	2832	
3. The mailing a	address (if different): 17000 RED HILL AVE STE 107, II	RVINE, CA 92614		
4. Date of incorp	poration/qualification: 07/07/2017 Docume	ent number: P170000580:	58	
	d street address of the current registered agent and regis rtment of State: (If resigned, enter resigned)	tered office on file with t	the	
	UNISEARCH, INC.	<u>_</u>		
	155 OFFICE PLAZE DRIVE			
	TALLAHASSEE, FL 32301			
6. The name and (if changed):	d street address of the new registered agent (if changed)	and /or registered office	2022 HAY 2	OSSA P
	UNISEARCH, INC.		20	(1 TECH
	1990 MAIN STREET, STE 750-709	(7) C (7) C (7) C (7) C	7 <u>7</u>	101
	P.O. Box NOT acceptable	F.	2:3	
	SARASOTA, FL 34236	rī	rj O	
The street address changed will	ress of its registered office and the street address of the l be identical.	e business office of its re	egistered	agent,
Such change was authorized by the	as authorized by resolution duly adopted by its board he board, or the corporation has been notified in writi	of directors or by an off ng of the change.	ficer so	
Signatu	ure of an officer or director	Printed or typed name and title		
I furthér agrée of my duties, ar document is bei	t the appointment as registered agent and agree to act to comply with the provisions of all statutes relative t nd I am familiar with and accept the obligation of my ing filed merely to reflect a change in the registered o is been notified in writing of this change.	t in this capacity, o the proper and complo position as registered a ffice address, I hereby o	ete perfoi gent. Or confirm t	rmance ; if this hat the
\iel	10, Church 05/01/2022			
Sig	gnature of Registered Agent	Date		<del></del>
If signing on bo	chalf of an entity:			
Jalle	Churik Ast. Sewetun			

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