## P18000066036

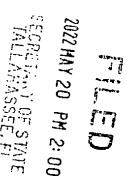
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
·						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



300387910723

05/20/22--01021--005 \*\*420.00



A. BUTLER
JUL 26 2022

## **COVER LETTER**

Amendment Section

TO:

Division of Corporations
SUBJECT: PORT ORANGE MODERN DENTISTRY, PA Name of Corporation
DOCUMENT NUMBER: P18000066036
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOELLE CHURIK
Name of Contact Person
UNISEARCH, INC.
Firm/Company
1990 MAIN STREET, STE 750-709
Address
SARASOTA, FL 34236
City/State and Zip Code
JOELLE.CHURIK@UNISEARCH.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JOELLE CHURIK  Name of Contact Person  at (888 )617-4478  Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:** 

Amendment Section
Division of Corporations
The Centre of Tallahassee
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 chai	provisions of sections 607.0502, 617.0502 age is submitted for a corporation organiz to change its registered office or register	zed under the laws of the State of $\overline{ ext{FI}}$	LORIDA		_
	he corporation: PORT ORANGE MODER				
2. The principal	office address: 1765 DUNLAWTON AVE,	STE 103, PORT ORANGE, FL 3212	9		
3. The mailing a	ddress (if different): 1700 RED HILL AVE	I IRVINE CA 92614			
4. Date of incorp	oration/qualification: 07/31/2018	Document number: P18000066	5036		
5. The name and	street address of the current registered ag tment of State: (If resigned, enter resigned	ent and registered office on file with			
	UNISEARCH, INC.				
	155 OFFICE PLAZE DRIVE		25 23 23	2027	
	TALLAHASSEE, FL 32301		ORET VLL/	2022 MAY 20	1
6. The name and (if changed):	street address of the new registered agen	t (if changed) and /or registered offi	HASSER HASSER	PH	37
	UNISEARCH, INC.		SIM	2: 0	-250
	1990 MAIN STREET, STE 750-709		:	6	
		NOT acceptable			
	SARASOTA, FL 34236	<del></del>			
The street address changed will	ss of its registered office and the street a be identical.	address of the business office of its	registe	red ag	ent,
Such change wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officed in writing of the change.	officer s	50	
Signatu	e of an officer or director	Printed or typed name and titl	c		_
I furthér agrée i of my duties, an document is bei	the appointment as registered agent and o comply with the provisions of all statud I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change.	ites relative to the proper and comp pation of my position as registered	l agent.	- Or. 11	this
h	dle Churc	05/01/2022			
	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Jule (	hurk Asst. Secretary				

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