(Re	equestor's Name)				
(Ac	ldress)				
(Ac	ddress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filling Officer:					

Office Use Only



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2021 SEP 10 AM 8: 41

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CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 992263 8306394					
AUTHORIZATION :					
COST LIMIT : \$ 35.00					
ORDER DATE : September 9, 2021					
ORDER TIME : 10:39 AM					
ORDER NO. : 992263-004					
CUSTOMER NO: 8306394					
CHANGE OF AGENT					
NAME: GRAND ROUNDS FLORIDA, P.A.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker EXT#					
EXAMINER:					

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

statement of cha	provisions of sections 607.050 ange is submitted for a corpord or to change its registered offic	ution organized under the la	tws of the State of	f_FL
1. The name of	the corporation: GRAND ROU	NDS FLORIDA, P.A.		
2. The principal	office address: One California	Street Suite 2300, San Fr	ancisco, CA 941	11
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 09/09/2	2019 Document	number: P1900	0069218
	d street address of the current r		ed office on file v	with the
	C T CORPORATION SYST	EM		
	1200 SOUTH PINE ISLAND	ROAD		_
	PLANTATION, FL 33324			
6. The name and (if changed):	d street address of the new reg	istered agent (if changed) ar	nd /or registered o	— office
	Corporation Service Compa	nny		_
	1201 Hays Street			
		P.O. Box. NOT acceptable		707
	Tallahassee	FL	32301	
The street address changed will	ess of its registered office and be identical.	the street address of the b	usiness office of	its registered agent.
Such change was authorized by the	as authorized by resolution du he board, or the corporation h	aly adopted by its board of as been notified in writing	directors or by a of the change.	n officer so
X	rue E aoni	Jill Cilmi, Vice		THE ST
I further agree of my duties, ar document is bei corporation ha	it of an officer or director the appointment as registere to comply with the provisions and I am familiar with and accing filed merely to reflect a closs been notified in writing of the Service Company	d agent and agree to act in of all statutes relative to to ept the obligation of my po tange in the registered offic	ited or typed name and this capacity, he proper and co sition as register ce address, I here	1
By: X)~	nature of Registered Agent	09/09/2021		
	enature of Registèred Agent		Date	
Grace E. Kirby	Asst. Vice President			
	yped or Printed Name			

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