P20 00006649

(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
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(Business Entity Name)							
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A. BUTLER JUL 26 2022

COVER LETTER

TO:	Amendment Section Division of Corporations	· ·			
SUBJ	JECT: NONA DENTISTS 3, PA				
Namo	of Corporation				
DOC	UMENT NUMBER: P20000006649				
The e	enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.			
Pleas	e return all correspondence concerning this	matter to the following:			
JOEL	LE CHURIK				
Namo	of Contact Person				
UNIS	EARCH, INC.				
Firm/	Company				
1990	MAIN STREET, STE 750-709				
Addr	ess				
SARA	ASOTA, FL 34236				
City/S	State and Zip Code				
	JOELLE.CHURIK@UNISEA	ARCH.COM			
E-ma	ail address: (to be used for future annual	report notification)			
For fi	urther information concerning this matter, p	please call:			
JOEL	LE CHURIK	at (888)617-4478			
	Name of Contact Person	at (888)617-4478 Area Code & Daytime Telephone Number			
Enclo	osed is a \$35.00 check made payable to the	Department of State.			
	Mailing Address:	Street Address:			
	Amendment Section	Amendment Section			
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee			
	1.O. DOX 0341	The Control Tunanassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.050 nge is submitted for a corpore r to change its registered offic	ation organizea	under the laws of th	he State of FLOR	RIDA	<u> </u>
1. The name of t	he corporation: NONA DENT	TISTS 3, PA				
2. The principal	office address: 12711 NORCO	OSSEE RD., BI	LDG B, STE 100, OR	LANDO, FL 328	332	
3. The mailing a	ddress (if different): 17000 R	ED HILL AVE	STE 107, IRVINE, C.	A 92614		
4. Date of incorp	poration/qualification: 01/24/2	020	Document numbe	P20000006649)	
5. The name and	I street address of the current truent of State: (If resigned, e	registered agen				
	UNISEARCH, INC.					
	155 OFFICE PLAZE DRIVE					
	TALLAHASSEE, FL 32301					
6. The name and (if changed):	istreet address of the new reg	f changed) and /or re	egistered office	2022 HAY	गान-जूद ा	
	UNISEARCH, INC.				AY 2	autant te contratt
	1990 MAIN STREET, STE 75				0	
	SARASOTA, FL 34236	P.O. Box NO	T acceptable	OF ST	PH 2:	O
The street address changed will	ess of its registered office and be identical.	d the street add	ress of the business	office of its reg	حا gistere	d agent,
	as authorized by resolution decided as a successful as a succe					
Signature of an officer or director Printed or typed name and						
l further agrée of my duties, an document is bei	the appointment as registers to comply with the provision ad I am familiar with and acc ing filed merely to reflect a c s been notified in writing of t	s of all statutes rept the obligat hange in the re	gree to act in this co relative to the prop ion of my position of gistered office addi	apacity, per and complet us registered ag ress, I hereby co	e perfo ent. O mfirm	ormance or, if this that the
h	de Church	0	5/01/2022			
/ 1	nature of Registered Agent			Date		
If signing on b	chalf of an entity:	An-				
July Ch	wik ASST. Selve yped or Printed Name	Munj				

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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