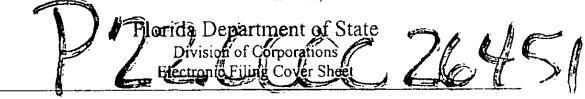
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Division of Corporations



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To:

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: (850)617-6380

From:

Account Name : WILLIAMS, PARKER, HARRISON, DIETZ & GETZEN, PLLC

Account Number : 072720000266 Phone : (941)366-4800

Fax Number : (941)552-7141

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE MEDISWISS, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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From: Corporate Paralegals

CR2E045 (04/13)

H22000232824 3

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 same of the corporation: Mediswiss, Inc.
2. The principal office address: 7205 22nd Street East, Sarasota, Ft. 34243
3. The mailing address (if different): same
4. Date of incorporation/qualification: April 6, 2022 Document number: P22000026451
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)
Christian Lang
3035 Bay Shore Road
Sarasota, FL 34234
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
7205 22nd Street East
P.O. Brox. NOT acceptable
Sarasota, FL 34243
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.
Christian Lang, As its President
Signesture of an inflicer or direction Printed or typed frame and trite
I hereby accept the appointment as registered agent and agree to act in this capacity. I jurther 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
Christian Lang If signing on behalf of an entity:
CENTEST HAN LANGS
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

 $\texttt{H22000232824-3} \quad \texttt{...} \quad$