

To: 18506176380

7/8/2021

Page 2 of 3

2021-07-08 08:27:42 CST

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From: Kimberly Laughrey

P94000079807

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

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REGISTERED AGENT CHANGE SHREEJI MEDICAL, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

JUL 09 2021

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Corporate Filing Menu

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH 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 name of the corporation: SHREEJI MEDICAL, P.A.
2. The principal office address: 2185 A CHENEY HWY., TITUSVILLE, FL 32780
3. The mailing address (if different): 44 S. Broadway, ste 100, White Plains, NY 10601
4. Date of incorporation/qualification: 10/31/1994 Document number: P94000079807
5. 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)
- DELVADIA, RASIKLAL
- 2185 A CHENEY HWY., TITUSVILLE, FL 32780
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- C T Corporation System
- 1200 South Pine Island Road
- P.O. Box NOT acceptable
- Plantation, Florida 33324

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 of the corporation has been notified in writing of the change.

Documented by: Leslie Prizant

Leslie Prizant, Secretary and General Counsel

Signature: 3A24WECC4EF452 Date: 7/7/21

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further 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.

C T Corporation System

July 7, 2021

By: Stephen Rullis

Signature of Registered Agent

Date

If signing on behalf of an entity:

Stephen Rullis, VP & Asst. Secy.

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

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DIVISION OF CORPORATIONS
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FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176380

FROM Yanet Avila

DATE 2021-07-08 14:23:39 GMT

RE LIVE2GO COMMUNICATIONS CORP

COVER MESSAGE

THANK YOU,

*Mary Martinez*

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