# The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. .1 .0

### SIGNATURE:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

# SIGNATURE: RAVNEET SANDHU

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# P11000048964

Entity Name: BRANDON-RIVERVIEW MEDICAL ASSOCIATES, P.A.

# **Current Principal Place of Business:**

519-A EAST BLOOMINGDALE AVE. BRANDON, FL 33511

# **Current Mailing Address:**

519-A EAST BLOOMINGDALE AVE. BRANDON, FL 33511

# FEI Number: 45-2610300

# Name and Address of Current Registered Agent:

SANDHU, RAVNEET K 519-A EAST BLOOMINGDALE AVE. BRANDON, FL 33511 US

City-State-Zip: BRANDON FL 33511

Electronic Signature of Registered Agent			
Officer/Director Detail :			
Title	D	Title	D
Name	SANDHU, RAVNEET K	Name	SANDHU, JAGDEEP S
Address	519-A EAST BLOOMINGDALE AVE.	Address	519-A EAST BLOOMINGDALE AVE.

Address City-State-Zip: BRANDON FL 33511

D

Mar 08, 2017 Secretary of State CC8001341052

Date

Certificate of Status Desired: No

FILED

03/08/2017 Date