



B0130-6548 02/24/2020 12:59PM Rec'd by SD SOS

Secretary of State
500 E. Capitol Ave
Pierre, SD 57501-5070
(605) 773-4845

STATEMENT OF CHANGE
OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH
SDCL 59-11-11

Filing Fee: \$10

Total Fee: \$10

Please Type or Print Clearly in Ink
Please submit one Original
Make payable to the SECRETARY OF STATE

1. Business ID and Name:

DL128408
BUSINESS ID

CHRIS DIAZ-FREED DENTAL, PROF. LLC
BUSINESS NAME

2. The name and address of the registered agent on file (Old Agent Name):

Street Address

Mailing Address

SOUTH DAKOTA REGISTERED AGENTS LLC
5300 NORMANS ROOST ROAD
RAPID CITY, SD 57702

SOUTH DAKOTA REGISTERED AGENTS LLC
PO BOX 8053
RAPID CITY, SD 57709

3. The NEW South Dakota Registered agent's name

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent or (b) a commercial registered agent.

(b) The South Dakota Commercial Registered Agent's name & CRA#

CRA#: 0000035

Street Address

Mailing Address

REGISTERED AGENTS INC
25 1ST AVE SW
STE A
WATERTOWN, SD 57201-3507

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a criminal penalty (SDCL 22-39-36).

02/24/2020

Dated

Email (Optional)

RILEY PARK (Electronically Signed)

Signature of an Authorized Person

RILEY PARK

Printed Name

Title