

479553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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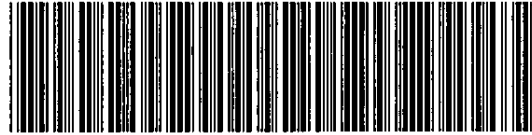
(Business Entity Name)

(Document Number)

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C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Botkin Parssi & Associates, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 479553

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bijan Parssi

Name of Contact Person

Botkin Parssi & Associates, Inc.

Firm/Company

2749 Exchange Court

Address

West Palm Beach, FL 33409

City/State and Zip Code

mailbox@botkinparssi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lupe Mercado

Name of Contact Person

347-392-6100  
at (561) 965-1957

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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: Botkin Parssi & Associates, Inc.
2. The principal office address: 2749 Exchange Court West Palm Beach, FL 33409
3. The mailing address (if different):

4. Date of incorporation/qualification: June 25, 1975 Document number: 479553

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)
Bijan Parssi
1904 Ascott Road
Juno Isles, FL 33408

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Bijan Parssi
2749 Exchange Court
West Palm Beach FL 33409

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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.

Signature of an officer or director: [Handwritten Signature]
Bijan Parssi, President
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.

Signature of Registered Agent: Same
Date

If signing on behalf of an entity:
Typed or Printed Name

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