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COVER LETTER .

TO: Registration Section Division of Corporations						
TERNER ELDER LAW, P.L						
SUBJECT: Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning th	nis matter to the following:					
Daniel Alan Terner						
Name of Person						
Terner Elder Law, P.L.						
Firm/Company						
8461 Lake Worth Rd. #232						
Address						
Lake Worth, FL 33467						
City/State and Zip Code						
daniel@ternerelderlaw.com						
E-mail address: (to be used for future and	nual report notification)					
For further information concerning this matter	r. please call:					
Daniel Alan Terner	561 227-1577					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following	g amount:					
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	me of the limited liability company: TERNER EL	.DER LA	W, P.L.		
2. (a)	Daniel Alan Terner, Esq. (b) Daniel		Alan Terner, Esq.		
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	8461 Lake Worth Rd. #232		8461 L a	ake Worth Rd. #232	
	Lake Worth, FL 33467	—	Lake W	orth, FL 33467	
	2/20/2042	_	1.400000	40050	
	3/28/2013		L130000		
١.	Date of filing/registration in Florida	4,		Document number	
. (a)	Daniel A. Terner, Esq.			_	
	Registered Agent and Registered Office shown on the records o TERNER ELDER LAW, P.L.	f the Florid	a Dept. of Sta	te:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u></u>	
	12177 Ken Adams Way #159			F	
	Wellington	, 33414		- EEC	
	Daniel A. Terner, Esq.			- -	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office at	Idrocs:		
	and of the second secon	<u>u viine au</u>	<u></u> .	. 5 <u>.</u>	
	TERNER ELDER LAW, P.L.			Ç	
	NEW Registered Office Address:			_	
	8461 Lake Worth Rd. #232			_	
	Lake Worth	. 33414			
he cha gent v vas/wc	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the of the regi liability co of the lin e limited	e State of Fl stered offic ompany, it nited liabili	re and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.	
Signal	ture of a member or authorized representative of a member			Printed or typed name of signee	
rrovisi.	by accept the appointment as registered agent and agons of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address. I	e perform	iance of my	duties, and I am familiar with and accept	

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00