P02000072914

| (Requestor's Name) | | |
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| , (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
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| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE
TALLAHASSEL FLORID

P.4 Change C.COULLIETTE

AUG 3 1 2009

EXAMINER

COVER LETTER

| TO: Amendme Division o | nt Section f Corporations | | |
|--|---|---|--|
| SUBJECT: PH | ILLIP SROKA, C.P.A., P.A. Name of Co | orporation | |
| DOCUMENT NUMBER: P02000072914 | | | |
| The enclosed State | ment of Change of Registered Office | Agent and fee are submitted for filing. | |
| Please return all co | orrespondence concerning this matter | to the following: | |
| | | | |
| Ed S. Torgas | | | |
| | Name of Con | tact Person | |
| | | | |
| Morrison, Brown, Argiz & Farra, LLP Firm/Company | | | |
| | 1 1113 00 | ····puny | |
| | 1001 Brickell Bay Dr | ive, 9th Floor. | |
| | Addr | | |
| | | | |
| Miami, Florida 33131 | | | |
| | City/State and | d Zip Code | |
| | etorgas@MBAF | CPA.com | |
| _ | R-mail address: (to be used for fu | ture annual report notification) | |
| | | | |
| For further informs | ation concerning this matter, please co | all: | |
| Ed S. Torga | <u>s</u> | at (305) 373-5500 EXT-2231 Area Code & Daytime Telephone Number | |
| Nar | ne of Contact Person | Area Code & Daytime Telephone Number | |
| Enclosed is a \$35.0 | 00 check made payable to the Departr | ment of State. | |
| | Mailing Address: Amendment Section | Street Address: Amendment Section | |
| | Division of Corporations | Division of Corporations | |
| | P.O. Box 6327 | Clifton Building | |

Tallahassee, FL 32314

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 in order to change its registered office or registered agent, or both, in the State of Florida. |
|--|
| 1. The name of the corporation: PHILLIP SROKA, C.P.A., P.A. |
| 2. The principal office address: 1001 Brickell Bay Drive, 9th Floor |
| Miami, Florida 33131 |
| 3. The mailing address (if different): C/O Morrison, Brown, Argiz & Farra, LLP 1001 Brickell Bay Drive, 9th Floor, Miami, Florida 33131 |
| 4. Date of incorporation/qualification: July 3, 2002 Document number: P02000072914 |
| 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) |
| Peninsula Registered Agents, Inc. |
| 200 South Biscayne Boulevard, 43 Floor |
| Miami, Florida 33131 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Ed S. Torgas c/o Morrison, Brown, Argiz & Farra, LLP P.O. Box NOT acceptable 1001 Brickell Bay Drive, 9th Floor, Miami, Florida 33131 |
| 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. Printed or typed name and title |
| Typed or Printed Name |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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