

P03000010368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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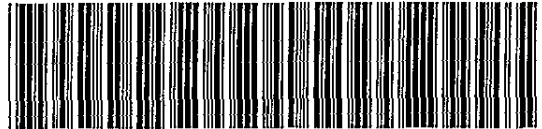
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LEGNARO AKL, P.A.
(Name of corporation)

DOCUMENT NUMBER: P03000010368

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:

ILARIA M. LEGNARO AKL
(Name of person)

LEGNARO AKL, P.A.
(Name of firm/company)

2575 South Bayshore Drive, Suite 6A
(Address)

Miami, Florida 33133
(City/state and zip code)

For further information concerning this matter, please call:

Illaria M. Legnaro Akl at (305) 857-9401
(Name of person) (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
409 E. Gaines Street
Tallahassee, FL 32399

**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: LEGNARO AKL, P.A.
2. The principal office address: 2575 SOUTH BAYSHORE DRIVE, SUITE 6A, MIAMI, FLORIDA 33133

3. The mailing address (if different): _____

4. Date of incorporation/qualification: JANUARY 27, 2003 Document number: P03000010368

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

CORPORATE CREATIONS NETWORK INC.

941 FOURTH STREET

MIAMI BEACH, FLORIDA 33139

6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed):

ILARIA M. LEGNARO AKL - LEGNARO AKL, P.A.

2575 SOUTH BAYSHORE DRIVE, SUITE 6A

(P.O. Box or personal mailbox NOT acceptable)

MIAMI, FLORIDA 33133

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.

Ilaria M. Legnaro AKL
(Signature of an officer, chairman or vice chairman of the board)

ILARIA M. LEGNARO AKL, 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.*

Ilaria M. Legnaro AKL
(Signature of Registered Agent)

March 3, 2003
(Date)

If signing on behalf of an entity:

LEGNARO AKL, P.A. - ILARIA M. LEGNARO AKL
(Typed or Printed Name)

PRESIDENT
(Capacity)

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

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

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