

P0300001/033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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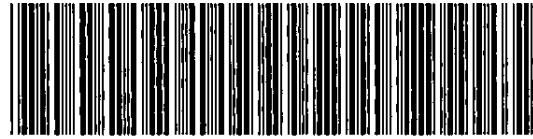
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

JUN 18 2012

T. ROBERTS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Michael S. Perse, P.A.  
Name of Corporation

**DOCUMENT NUMBER:** P03000011033

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:

Michael S. Perse, Esq.

Name of Contact Person

Michael S. Perse, P.A.

Firm/Company

201 S. Biscayne Blvd., 17th Floor

Address

Miami, FL 33131

City/State and Zip Code

mperse@klugerkaplan.com

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

For further information concerning this matter, please call:

Michael S. Perse

Name of Contact Person

at ( 305 ) 379-9000

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: Michael S. Perse, P.A.
2. The principal office address: 201 S. Biscayne Blvd., 17th Floor  
Miami, FL 33131
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/29/03 Document number: P03000011033

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)

Miami Center Registered Agents, LLC

201 S. Biscayne Blvd., Ste 1700

Miami, FL 33131

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

Michael S. Perse

201 S. Biscayne Blvd., 17th Floor

P.O. Box NOT acceptable

Miami, FL 33131

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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.

Michael S. Perse  
Signature of an officer or director

Michael S. Perse

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.

Michael S. Perse  
Signature of Registered Agent

June 12, 2012  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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