## 107000057241

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Correses document by turphone can The 5/29/27	
by tuppyon, cay	
Th 5/29/27	
•	

Office Use Only



200102967862

05/24/07--01047--002 \*\*35.00

Rock

07 MAY 24 PH 12: 42
SEURETARY OF STATE
FALLAHASSEE, FLORIDA

T. Roberts MAY D. A. 2002

## **COVER LETTER**

Amendment Section Division of Corporations	
SUBJECT: ROXANNE LOUH, P.A. (Name of Corpor	ation)
· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER: PO70006572	241
The enclosed Statement of Change of Registered Office/Age	ent and fee are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
ROXANNE LOUH (Name of Contact)	Person)
(Firm/Compar	ny)
14366 Cherry Lake	Dr. West
Jacksonville FL, 3 (City/State and Zip	
For further information concerning this matter, please call:	
Roxanne Louh (Name of Contact Person)  at	, 904 , 318-9418
(Name of Contact 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 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: ROXANNELOUM, P.A.	
2. The principal office address: 1545 Landon Ave., Jacksonville, FL, 3220	7
3. The mailing address (if different): 1545 Landon Ave, Jacksonville, Pl, 32	207
4. Date of incorporation/qualification: May 1, 2007 Document number: P07000572	<u> </u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
ROXANNE LOUH	
1545 Landon Ave.	•
Jacksonville, FL 32207	FILED
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	5 5
ROXANNE LOUN	<b>.</b>
(P.O. Box NOFficceptable)	
Jacksonville, FC, 32258	
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)  Roxanse Louh, 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 performant of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if th document is being filed merely to reflect a change in the registered office address, I hereby confirm that th corporation has been notified in writing of this change.	:e is e
(Date)	
If signing on behalf of an entity:	
(Typed or Printed Name)	
* * * FILING FEE: \$35.00 * * *	

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

\* Just sent an enail