## P0800013266

(Re	questor's Name)	,
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Special Instructions to I	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: SUSANH STERN P.A.  Name of Corporation		
DOCUMENT NUMBER: <u>PO8000</u> \3266		
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:		
Susan H. Stern Ovesident Name of Contact/Person		
Susan H. Stern P. A. Firm/Company		
1515 S. Federal Hyhway Svitchoy Address		
Bo ca Ration FL 33432 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
SUSAN Stevn at (561) 852-2522  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

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## 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: Susan H Stern, R.A.
2. The principal office address: 1515 5 Federal Highway Suite 404 Bo ca Raton FL 33432
3. The mailing address (if different):
4. Date of incorporation/qualification: 2508 Document number: 7080001326
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)
Susant-Stern
2385 NW Executive Center Dr. suite 100 Boca Raton FL 33431
Boca Raton FL 33431
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Susan H. Stern
200 1515 S. Federal Hyman Svite 404 P.O. Box NOT acceptable
Boca Ruton FL 33432
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.
Susanstern Ovesident  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.
Mr. 7/22/11
Signature of Registered Agent 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