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SECRETARY OF STATE
AND ANASSEE, FA COUNTY

RA Change

MAY 0 6 2010

COVER LETTER

TO: Amendmen Division of	t Section Corporations						
SUBJECT: The Advocacy Law Firm, P.A. Name of Corporation							
DOCUMENT NU	мвек:Р10	0000010538					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please return all cor	respondence concerning this matte	er to the following:					
		E. Stern					
_	Name of Co	ontact Person					
		Law Firm, P.A.					
	THINK	company					
	131 NE First A	venue, Suite 105					
		dress					
	Hallandale, I	Florida, 33009 and Zip Code					
	City/State:	and Zip Code					
	advocacylawfii	m@amail.com					
advocacylawfirm@gmail.com E-mail address: (to be used for future annual report notification)							
For further informa	tion concerning this matter, please	call:					
	Ronald E. Stern	205 . 677 2270					
	ne of Contact Person	at (305) 677-2378 Area Code & Daytime Telephone Num	ber				
Enclosed is a \$35.0	0 check made payable to the Depa	rtment 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

statement of cha	nge is submitted for a corporation of	.0502, 607.1508, or 617.1508, Florida Starganized under the laws of the State of \overline{Fl} gistered agent, or both, in the State of Flo	<u>orida</u>	<u> </u>	.
	the corporation: The Advocacy				
2. The principal	office address: 131 NE First Ave	enue, Suite 105 Hallandale, Floric	ia, 3300)9	
3. The mailing a	ddress (if different):				
4. Date of incor	poration/qualification: February 4	, 2010 Document number: P1	000001	0538	
	d street address of the current register rtment of State: (If resigned, enter res	red agent and registered office on file with signed)	the		
	Jonathan Weitz				
	1000 Island Blvd Suite 2011	, Aventura, Florida 33009			
			SA		
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered offic	ECRETAL	O MAY -	
	Ronald E. Stern		37 cs	ے۔ ج	Carrier .
	131 NE First Avenue, Suite		S. J.	PH 12: 32	
	P.O Bo Hallandale, Florida 33009	x NOT acceptable	AIR	30	
The street addr		treet address of the business office of its	registere	d ager	ıt,
		opted by its board of directors or by an or on notified in writing of the change.			
	ald E. Flern ire of an officer or director	Ronald E. Stern, Pre	sident		-
I hereby accept I further agree of my duties, at document is be corporation ha	the appointment as registered age; to comply with the provisions of ali an familiar with and accept th ing filed merely to reflect a change s been notified in writing of this cha	nt and agree to act in this capacity. I statutes relative to the proper and comp e obligation of my position as registered in the registered office address, I hereby ange.	olete perf agent. (confirm	orman Or, if ti that ti	ice his he
<u>></u>	gnature of Registered Agent	Date			_
	chalf of an entity:	Date			
ii signing on b	onan or an energy.				
	yped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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