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SECRETARY OF STATE OF CORPORATIONS



COVER LETTER

	·				
SUBJECT: MCCARTNEY LAW, P.A.					
	Name of Corporation				
DOCUMENT NUMBER:	P11000029745				
The enclosed Statement of Ch	nange of Registered Office/Agent and fee are submitted for filing.				
Please return all corresponder	nce concerning this matter to the following:				
	Lisa D. McCartney Name of Contact Person				
	Name of Contact Person				
	McCartney Law, P.A.				
	Firm/Company				
	P.O. Box 48185				
	Address				
	St Petershurg Fl 33743				
	St. Petersburg, FL 33743 City/State and Zip Code				
	Imccartney@mccartneylaw.com				
E-mail ac	ldress: (to be used for future annual report notification)				
For further information conce	erning this matter please call:				
For further information conce	ming this matter, please can.				
Lisa McC					
Name of Cont	A O L O D. P. L. T. L. L. Williams				

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

TEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a cor	poration organize	607.1508, or 617.1508, Flo d under the laws of the Stai d agent, or both, in the Stai	te of FLORIDA		
1. The name of t	he corporation: MCCA	RTNEY LAV	V, P.A.			
2. The principal	office address: 7011 C	ENTRAL AVEN				
3. The mailing a	ddress (if different): P.C ERSBURG, FL 337	D. BOX 48185				
	poration/qualification:		Document number:	P11000029745		
5. The name and	•	ent registered ager	t and registered office on f	ile with the		
LISA D MCCARTNEY						
	7211 1ST AVENUE	SOUTH				
	ST. PETERSBURG	6, FL 33707				
6. The name and (if changed):	SECRETARY LISA D MCCARTNEY LISA D MCCARTNEY					
	LISA D MCCARTNEY					
	7011 CENTRAL AVENUE, SUITE C P.O. Box NOT acceptable ST. PETERSBURG, FL 33710 ST. PETERSBURG FL 33710					
	P.O. Box NOT acceptable			- RATE		
	ST. PETERSBURG, FL 33710					
The street addre as changed will	ess of its registered office be identical.	e and the street ad	dress of the business offic	e of its registered agent,		
Such change wa authorized by th	as authorized by resolutions board, or the corporation	on duly adopted b ion has been notif	y its board of directors or ied in writing of the chang	by an officer so ge.		
Jan 2.	m Cathy		Lisa D. McCartn	ney, President		
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as regi to comply with the provise d I am familiar with and ng filed merely to reflect toeen notified in writing	stered agent and a sions of all statute l accept the obliga t a change in the r of this change.	ngree to act in this capacit is relative to the proper an ition of my position as reg registered office address, I			
Signature of Registered Agent			9/28/11			
Sign	nature of Registered Agent	-	Date			
If signing on be	half of an entity:					
Ty	yped or Printed Name	<u></u>				

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

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