B1200029818

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SECRETARY OF STATE

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT:ERIL ERDEM P.A.
	Name of Corporation
DOC	UMENT NUMBER: P12000029868
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	ERIL ERDEM
	Name of Contact Person
	Firm/Company
	PO BOX 212303
	Address
	ROYAL PALM BEACH, FL 33421
	City/State and Zip Code
	110000 © 1
	eril2006@yahoo.com E-mail address: (to be used for future annual report notification)
	E-man address. (to be dised for rature annual report notification)
For fu	rther information concerning this matter, please call:
ERIL	ERDEM at (561)246-9442
	Name of Contact Person Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Callabasses, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

TO:

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 <u>FL</u> in order to change its registered office or registered agent, or both, in the State of Florida.	
I. The name of the corporation: ERIL ERDEM P.A.	
2. The principal office address: 2643 COOPER WAY	
WELLINGTON, FL 33414	<u>.</u>
3. The mailing address (if different): PO BOX 212303	
ROYAL PALM BEACH, FL 33421	
4. Date of incorporation/qualification: 03/28/2012 Document number: P12000029868	
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)	
ERIL ERDEM	
108 HAMMOCKS CT	
GREENACRES, FL 33413 ₹	/) "1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	\#Y1.58\ - -
ERIL ERDEM	≓r -
2643 COOPER WAY	s No.
P.O. Box NOT acceptable	T]
WELLINGTON, FL 33414	
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 ERIL ERDEM(P, D) 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.	
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
CR2E045 (03/12)