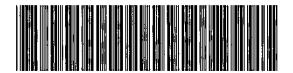
P12000088034

(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:



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09/18/14--01013--013 **35.00

SECTION OF CAME

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Earle Chisholm PA

Name of Corporation

DOCUMENT NUMBER: P12000088034

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:

Earle Chisholm

Name of Contact Person

Earle Chisholm PA

Firm/Company

2500 NE 48 Lane #302

Address

Fort Lauderdale FL 33308

City/State and Zip Code

earle5@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Earle Chisholm

_/954 \815-34

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35,00 check made payable to the Department of State.

RECEIVED OCT 10 PH 2: U

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



September 25, 2014

EARL CHISHOLM EARL CHISHOLM, PA 2500 NE 48 LANE #302 FORT LAUDERDALE, FL 33308

SUBJECT: EARLE CHISHOLM, PA

Ref. Number: P12000088034

We have received your document for EARLE CHISHOLM, PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 714A00020604

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: Earle Chisholm PA	
2. The principal office address: 2500 NE 48 lane #302 Fort Lauderdale FL 33308	
A - A	
3. The mailing address (if different): As Above	
4. Date of incorporation/qualification: 10/18/12 Document number: P12000088034	
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)	
Corporation Service Company	
1201 Hays Street	
Tallahassee FL 32301	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
(if changed): Earle Chisholm 2500 NE 48 Lang #202	7
2000 NE 40 Lane #302	
P.O. Box NOT acceptable	2
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 EARLECH SHOLM 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.	
10/3/14	
Signature of Registered Agent If signing on behalf of an entity:	
Typed or Printed Name	

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