

P19000006482

(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:

Office Use Only



200414310222

08/22/23--01011--005 **35.00

08/22 AM 9:35

08/22

2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Adam M. Pastis, P.A.
Name of Corporation

DOCUMENT NUMBER: P19000006482

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:

Adam M. Pastis

Name of Contact Person

Adam M. Pastis, P.A.

Firm/Company

901 N Lake Destiny Rd, Suite 305

Address

Maitland FL 32751

City/State and Zip Code

apastis@pdmplaw.com

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

For further information concerning this matter, please call:

Amy Cunningham

Name of Contact Person

at (407) 904-2660

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Adam M. Pastis, P.A.
2. The principal office address: 901 N Lake Destiny Rd, Suite 305, Maitland FL 32751

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/11/2019 Document number: P19000006482

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)

Adam M. Pastis
485 N Keller Rd, Suite 401
Maitland FL 32751

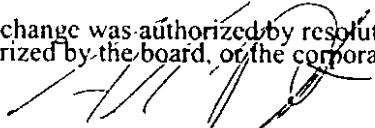
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Adam M. Pastis
901 N Lake Destiny Rd, Suite 305
Maitland FL 32751
P.O. Box NOT acceptable

2023 AUG 15 9:55

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

Adam M. Pastis/Owner

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

8/15/23

Date

If signing on behalf of an entity:

Adam M. Pastis

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 (04/13)



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation
ADAM M. PASTIS, P.A.

Filing Information

Document Number P19000006482
FEI/EIN Number NONE
Date Filed 01/17/2019
Effective Date 01/11/2019
State FL
Status ACTIVE

Principal Address

901 N Lake Destiny Rd, Suite 305
MAITLAND, FL 32751

Changed: 08/08/2023

Mailing Address

901 N Lake Destiny Rd, Suite 305
MAITLAND, FL 32751

Changed: 08/08/2023

Registered Agent Name & Address

PASTIS, ADAM M
485 N. KELLER RD.
SUITE 401
MAITLAND, FL 32751

Officer/Director Detail

Name & Address

Title P

PASTIS, ADAM M
485 N. KELLER RD.
MAITLAND, FL 32751

Title VP