## Pathologo 865 Michael Mahnerder Requester's Name P. S. Boy 55/260 Address Jachsonalle J 32255-1240 Office Use Only Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.				
2.	(Corporation Name) (Corporation Name)		(Document #) <b>7000033190177</b> -07/11/0001016006	
۷. <u>.                                   </u>			(Document #)	*************************************
3			(Document #)	
4	(Co	orporation Name)	(Document #)	
	Walk in Mail out	☐ Pick up time _ ☐ Will wait	☐ Photocopy	Certified Copy Certificate of Status
NEW FILINGS			<u>AMENDMENTS</u>	
	Profit Not for Profit Limited Liability Domestication Other		<ul> <li>□ Amendment</li> <li>□ Resignation of R.A., Officer/Director</li> <li>□ Change of Registered Agent</li> <li>□ Dissolution/Withdrawal</li> <li>□ Merger</li> </ul>	
OTHER FILINGS			REGISTRATION/QUALIFICATION	
	Annual Repo		Foreign Limited Partne Reinstatement Trademark Other	- 12 11 11 11

## 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,
the undersigned corporation organized under the laws of the State of $Florido$
submits the following statement in order to change its registered office or registered agent, or both, in
1. The name of the corporation is: Innovative Accounting Services INC.
1. The hank of the corporation is: 111110VOGIVE FICOUNTING DEVVICES, INC.
2. The mailing address of the corporation is: 5424 N. Main Street, #1
Uacksonville, FL 32208
3. Date of incorporation/qualification: 12/12/94 Document number: P94000898-65
4. The name and address of the current registered agent and office:
Michael N. Schneider
100 National Financial Bldg. 4215 South point Blvd.
Jacksonville, FL 32216
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Michael N. Schneider
5150 Belfort Road Bldg. 100
Vacksonville, FL 32756
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.
authorized by the board.
(Signature of an officer, chairman or vice chairman of the board)  (Date)
R Parliant Provided
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Mah IA- bela 7/100
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
(Onputty)
*** FILING FFF. \$35.00 * * *

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