P04000151071

| (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



800215053858

RACharge 12-13-11

12/12/11--01024--008 **35.00

WHIND I DESSYNVIAME SECULTIVEL OF SHILL IN DECITE WHEN SO

COVER LETTER

| TO: Amendment Sec Division of Corp | | | | | |
|--|------------------------------------|-----------------------------|--------------------|--|--|
| SUBJECT:L | eavengood, Nash, Dau Name of Co | uval & Boyle, P.A. | · . | | |
| DOCUMENT NUMBE | R:P040 | 00151071 | | | |
| The enclosed Statement | of Change of Registered Office | /Agent and fee are submitte | ed for filing. | | |
| Please return all correspondent | ondence concerning this matter | to the following: | | | |
| | | | | | |
| | lan Richard L Name of Con | .eavengood | | | |
| | Name of Con | tact Person | | | |
| | Laurananad Nach D | November D. A. | | | |
| | Leavengood, Nash, D | | | | |
| | Firm/Co | mpany | | | |
| | | • | | | |
| | 3900 First Street N | Jorth Suite #100 | | | |
| | Addr | | | | |
| | | | | | |
| | | . ' | | | |
| St. Petersburg, FL 33703 | | | | | |
| City/State and Zip Code | | | | | |
| | | | | | |
| ileavengood@leavenlaw.com | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| | | | | | |
| | | | | | |
| For further information of | concerning this matter, please ca | all: | | | |
| | | 707 | | | |
| | ard Leavengood | _ at (| 327-3328 | | |
| Name of | Contact Person | Area Code & Daytim | e Telephone Number | | |
| Enclosed is a \$35.00 che | ck made payable to the Departr | nent of State. | | | |
| | | | | | |
| | Mailing Address: | Street Address: | | | |
| | Amendment Section | Amendment Sec | tion | | |
| | Division of Corporations | Division of Corp | porations | | |
| | P.O. Box 6327 | Clifton Building | , | | |
| | Tallahassee, FL 32314 | 2661 Executive | | | |
| | | Tallahassee, FL | 32301 | | |

TO:

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

| • | e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State Lange is submitted for a corporation organized under the laws of the State of Flo | |
|--|--|---|
| | ler to change its registered office or registered agent, or both, in the State of Flori | |
| 1. The name of | the corporation: Leavengood, Nash, Dauval & Boyle, P.A. | |
| 2. The principal | office address: 2958 First Avenue North, St. Petersburg, FL 33713 | |
| | | |
| 3. The mailing a | address (if different): 2958 First Avenue North, St. Petersburg, FL 33 | 5713 |
| 4. Date of incor | rporation/qualification: 11/29/04 Document number: P04 | 000151071 |
| | nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned) | ne |
| | Christopher C. Nash | \$ a ≤ |
| | 2958 First Avenue North | 顯月刀 |
| | St. Petersburg, FL 33713 | 12 A |
| 6. The name and (if changed): | nd street address of the new registered agent (if changed) and /or registered office | MII: 50 |
| | Ian Richard Leavengood | 3 00 |
| | 3900 First Street North, Suite #100 | |
| | P.O. Box NOT acceptable | |
| | St. Petersburg, FL 33703 | |
| The street address changed will | ress of its registered office and the street address of the business office of its rell be identical. | gistered agent, |
| Such change was authorized by the | vas authorized by resolution duly adopted by its board of directors or by an off the board, or the corporation has been notified in writing of the change. | icer so |
| Signatu | lan Richard Leavenge Printed or typed name and fifte | bod |
| I hereby accept I further agree of my duties, an document is bei corporation has | t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comple and I am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address, I hereby consistent and in writing of this change. | tte performance gent. Or, if this onfirm that the |
| LK | 11/14/2011 | |
| _ | gnature of Registered Agent Date | |
| If signing on be | ehalf of an entity: | |
| | Richard Leavengood Typed or Printed Name | |
| | * * * FILING FEE: \$35.00 * * * | |

٠. '