I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ADAM S. GOLDSTEIN

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P00000065511

Entity Name: ADAM S. GOLDSTEIN, P.A.

Current Principal Place of Business:

3909 CENTRAL AVE SAINT PETERSBURG, FL 33713

Current Mailing Address:

3909 CENTRAL AVE SAINT PETERSBURG, FL 33713

FEI Number: 59-3679214

Officer/Director Detail :

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GOLDSTEIN, ADAM S 3909 CENTRAL AVENUE SAINT PETERSBURG, FL 33713 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Title	DPVT	Title	D
Name	GOLDSTEIN, ADAM S	Name	GOLDSTEIN, ADAM S
Address	3909 CENTRAL AVE	Address	3909 CENTRAL AVE
City-State-Zip:	SAINT PETERSBURG FL 33713	City-State-Zip:	SAINT PETERSBURG FL 33713

Certificate of Status Desired: No

FILED Apr 28, 2015 Secretary of State

Date

Secretary of Stat

04/28/2015 Date

PRESIDENT