#### above, or on an attachment with all other like empowered. DIR

#### SIGNATURE: SCOTT A. SREBNICK

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P07000071767

Entity Name: SCOTT A. SREBNICK, P.A.

## **Current Principal Place of Business:**

310 NW 26 STREET SUITE B MIAMI, FL 33127

#### **Current Mailing Address:**

310 NW 26 STREET SUITE B MIAMI, FL 33127 US

### FEI Number: 26-0402530

# Name and Address of Current Registered Agent:

SREBNICK, SCOTT A 310 NW 26 STREET SUITE B MIAMI, FL 33127 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:

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title	Ρ	Title	DIR
Name	SREBNICK, SCOTT A	Name	SREBNICK, SCOTT A
Address	310 NW 26 STREET SUITE B	Address	310 NW 26 STREET SUITE B
City-State-Zip:	MIAMI FL 33127	City-State-Zip:	MIAMI FL 33127

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

## FILED Jan 17, 2023 Secretary of State 3639862293CC

Certificate of Status Desired: No

01/17/2023

Date