

485392

CARROLL, HALBERG & JONES, P.A.

ATTORNEYS AT LAW

COCONUT GROVE BANK BUILDING - 5TH FLOOR

2701 SOUTH BAYSHORE DRIVE

MIAMI, FLORIDA 33133-5387

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September 3, 1997

net
APP. JIM only
"REPLY TO MIAMI"

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-09/05/97--01036--005
*****96.25 *****96.25

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

(904-487-6050)

RE: CARROLL, HALBERG & JONES, P.A.
FIRM NAME CHANGE

Dear Sir or Madam:

I have enclosed a completed ARTICLES OF AMENDMENT for our firm along with a check for \$96.25 to Department of State. This will officially change our firm name to the name referenced above.

If you have any additional questions please do not hesitate to call me.

Very truly yours,

Pat Katz

Pat Katz
Administrator For the Firm

Pk:(enclosure as stated)

9/18

NC
9/12



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 12, 1997

PAT KATZ
CARROLL, HALBERG & JONES, P.A.
2701 SO. BAYSHORE DR., 5TH FL
MIAMI, FL 33133-5387

SUBJECT: CARROLL, HALBERG & JONES, P.A.
Ref. Number: 485392

We have received your document for CARROLL, HALBERG & JONES, P.A. and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on May 28, 1997.

Enclosed is an application for refund.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6880.

Karen Gibson
Corporate Specialist

Letter Number: 097A00045432

**STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND**

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State Treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State Treasury, which are subject to refund. The following information is submitted to substantiate the claim.

THE INFORMATION IN THIS BOX WILL BE USED TO WRITE AND MAIL YOUR REFUND CHECK. PLEASE TYPE OR PRINT LEGIBLY.

| | |
|--|--|
| Name: <u>PAT KATZ</u> | EIN or SS#: <u>59-1613132</u> |
| Address: <u>CARROLL, HALBERG & JONES, P.A.</u> | |
| <u>2701 S. BAYSHORE DR., 5TH FL</u> | |
| <u>MIAMI, FL 33133-5387</u> | |
| Amount: <u>\$96.25</u> | Date Paid: _____ |
| Reason for Claim: <u>NAME CHANGE. ALREADY FILED 5/28/97 for #485392</u> | |
| <u>CARROLL, HALBERG & JONES, P.A.</u> | |
| | |
| Certified true and correct this <u>15</u> day of <u>September</u> , 19 <u>97</u> | |
| XXX | Signature <u>Kat Katz / administrator for firm</u> |
| * Must be completed if authority is other than Section 215.26, Florida Statutes. KAREN GIBSON | |

| | |
|--|---|
| Do Not Write in This Box - For Agency Use Only | |
| Agency recommends approval of above claim and submits the following information to substantiate the claim: | |
| Amount of recommended refund \$ <u>\$96.25</u> | |
| The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on | |
| State Treasurer's Receipt No. <u>01036 005</u> | dated <u>09/05/97</u> |
| NAME OF ACCOUNT: <u>45202130001453000000000010000</u> | |
| Statutory Authority for Collection <u>607.0122</u> | |
| It is requested that payment be made from the following account: | |
| NAME OF ACCOUNT: <u>452021300014530000000022002000</u> | |
| Certified true and correct this _____ day of _____, 19 _____ | |
| Department of State, Division of Corporations (Agency) | (Authorized Agency Signature and Title) |