600367

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RA-Change

C. Coulliette SEP 1 0 2007.

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SYLVAN SCHOTZ, M.D., P.A. (Name of Corporation)
DOCUMENT NUMBER: 600367
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lawrence M. Ploucha, Esquire (Name of Contact Person)
Atkinson, Diner, Stone, Mankuta & Ploucha, P.A. (Firm/Company)
One Financial Plaza, Suite 1400 (Address)
Fort Lauderdale, Florida 33394 (City/State and Zip Code)
For further information concerning this matter, please call:
Lawrence M. Ploucha, P.A. (Name of Contact Person) at (954) 925-5501 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of change is submitted for a corporation organi in order to change its registered office or registe	zed under the laws of the State of Florida		
1. The name of the corporation: Sylvan Schotz, M.D.,	P.A		
2. The principal office address: 4302 Alton Road, Suit	e 1010, Miami Beach, FL 33140		
3. The mailing address (if different):			
4. Date of incorporation/qualification: April 2, 1968	Document number: 600367		
5. The name and street address of the current registered ag Florida Department of State:	gent and registered office on file with the		
Atkinson, Diner, Stone, Black	k, et al.		
200 S.E. First St., (PH); 194			
Hollywood, Florida 33022	Hollywood, Florida 33022		
6. The name and street address of the new registered agent (if changed):	AHASSEE. FLORIDA t (if changed) and /or registered office		
Lawrence M. Ploucha, Esq			
One Financial Plaza, Suite (P.O. Box NOT acceptable)	1414		
Fort Lauderdale, Florida 33	3394		
The street address of its registered office and the street as changed will be identical.			
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer so iffice in writing of the change.		
	Sylvan Schotz, President (Printed or typed name and title)		
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu of my duties, and I am familiar with and accept the oblid document is being filed merely to reflect a change in the corporation has been notified in writing of this change.	l agree to act in this capacity. ttes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the		
C.M.	6 22 2007 (Date)		
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity:			
(Typed or Printed Name) * * * FILING FE	F• \$35 AA * *		

APPROVED AND FILED