

704 969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

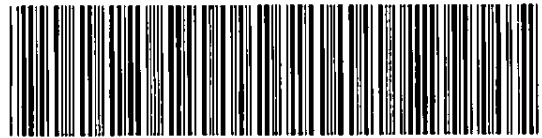
(Business Entity Name)

(Document Number)

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NOV 13 2017

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17 NOV -8 AM 3:05
CLERK OF SUPERIOR COURT
AT AMSTERDAM, NY

R/A - ch

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Edward Lawrence, Inc.
Name of Corporation

DOCUMENT NUMBER: 704969

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:

Name of Contact Person

Pro Cura Services, Inc.
Firm/Company

3459 Van Dyke Rd #191
Address

Lutz, FL 33558
City/State and Zip Code

debra.cappelli@procuraservices.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Cappelli at (813) 337-6206
Name of Contact Person 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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Edward Lawrence, Inc.
2. The principal office address: 3959 Van Dyke Rd #191
Lutz, FL 33558
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/21/1962 Document number: 704969
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

~~Resigned~~ Tyler, Shirley A
8821 ML King St N
St Petersburg, FL 33702

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ProCura Services, Inc.
3959 Van Dyke Rd #191
P.O. Box NOT acceptable
Lutz, FL 33558

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Ingrid Comberg
Signature of an officer or director

Ingrid Comberg President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

11/6/17
Date

If signing on behalf of an entity:

Michael Marchant
Typed or Printed Name

*** FILING FEE: \$35.00 ***