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Certified Copies	_ Certificates of	Status
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SEGRETARY OF STATE
TABLAHASSEE, FLORID

R.A. Charge C.COULLIETTE AUG 14 27009

**EXAMINER** 

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Brown Sims	s, P.C.				
	Name of C	orporation				
DOCUMENT NUMBE	R:F070	000000776				
The enclosed Statement	of Change of Registered Office	e/Agent and fee are submit	ted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:				
	Patricia A. Bynum Name of Contact Person					
	Name of Cor	ntact Person	<u> </u>			
	n 0					
	Brown Sims, P.C. Firm/Company					
	•	<b>-,</b>				
	1177 West Loop South, Tenth Floor					
	Addi	ress	<del></del>			
	Houston, TX 77027 City/State and Zip Code					
City/State and Zip Code						
	pbynum@brov	vnsims.com				
pbynum@brownsims.com  E-mail address: (to be used for future annual report notification)						
For further information of	concerning this matter, please c	all:				
Patric	ia A. Bynum Contact Person	at ( 713 )	629-1580			
Name of	Contact Person	Area Code & Daytin	ne Telephone Number			
Enclosed is a \$35.00 che	ck made payable to the Depart	ment of State				
	on made payable to the Bepart	mont of State.	•			
	Mailing Address:	Street Address:				
	Mailing Address: Amendment Section	Street Address: Amendment Se				
	Division of Corporations	Division of Co				
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Buildin 2661 Executive	_			
	rananassee, r.L. 32314	ZOOT EXCULTIVE	s Center Circle			

Tallahassee, FL 32301

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

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, ange is submitted for a corporation organized under th er to change its registered office or registered agent, of	ne laws of the State o	of TX
1. The name of the	the corporation: Brown Sims, P.C.		
	office address: 9130 S. Dadeland Blvd. #1609	), Miami, FL 331	156
3. The mailing ac	address (if different):		
4. Date of incorp	poration/qualification: 10/25/79 Docum	nent number: FD	7000000 776
	d street address of the current registered agent and regi rtment of State: (If resigned, enter resigned)	stered office on file	with the
	Frank J. Sioli		
	9100 South Dadeland Boulevard, Suite 90	)8	T A
	Miami, FL 33156		OS AI
6. The name and (if changed):	d street address of the new registered agent (if changed	l) and /or registered	লো <sup></sup> < '
	Frank J. Sioli		
	9130 S. Dadeland Blvd. #1609, Miami, FL P.O. Box NOT acceptable	33156	: 35   A1€   BA
The street addre	ess of its registered office and the street address of the be identical.	ne business office of	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board he board, or the corporation has been notified in writ	d of directors or by ting of the change.	an officer so
Signatur	Kenr	neth G. Engerra	nd, President
l further agree to of my duties, and document is beir	the appointment as registered agent and agree to a to comply with the provisions of all statutes relative ad I am familiar with and accept the obligation of my ing filed merely to reflect a change in the registered is been notified in writing of this change.	ct in this capacity. to the proper and a y position as regist office address, I he	complete performance ered agent. Or, if this ereby confirm that the
$\mathcal{L}$	nature of Registered Agent	16/09	
	nature of Registered Agent	Date	
	shalf of an entity:		
	yped or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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