

F60799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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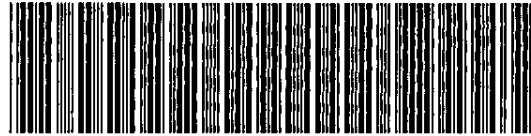
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

11-0-11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 31, 2011

MARIELLE WESTERMAN, ESQ.
146 SECOND STREET NORTH, STE 100
ST PETERSBURG, FL 33701

SUBJECT: WESTERMAN WHITE ZETROUER, P.A.
Ref. Number: F60799

We have received your document for WESTERMAN WHITE ZETROUER, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 111A00024775

RECEIVED
11 NOV 10 AM 10:14
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WESTERMAN WHITE ZETROUER, P.A.
Name of Corporation

DOCUMENT NUMBER: F60799

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:

Marielle Westerman
Name of Contact Person

Westerman White Zetrouer, P.A.
Firm/Company

146 2nd Street North, Suite 100
Address

St. Petersburg, Florida 33701
City/State and Zip Code

mwesterman@wwzlegal.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marielle Westerman at (727) 329-8956
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

—already provided

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: WESTERMAN WHITE ZETROUER, P.A.
2. The principal office address: 146 2nd Street North, Suite 100, St. Petersburg, Florida 33701
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/4/1982 Document number: F60799

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)

MARIELLE WESTERMAN, ESQUIRE

146 2nd Street North, Suite 208

St. Petersburg, Florida 33701

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

MARIELLE WESTERMAN, ESQUIRE

146 2nd Street North, Suite 100

P.O. Box NOT acceptable

St. Petersburg, Florida 33701

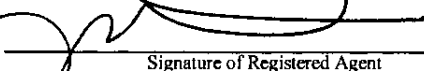
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

Marielle Westerman
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 of Registered Agent

11-7-11

Date

If signing on behalf of an entity:

Marielle Westerman
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA