

F 6 3 5 2 6

(Requestor's Name)

ALICE FENIQUITO  
1194 HYACINTH PLACE  
WELLINGTON, FL. 33414

(City/State/Zip/Phone #)

☐

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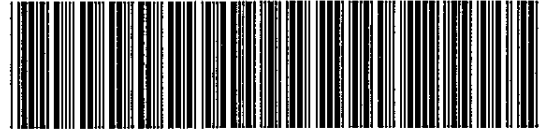
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State

October 31, 2002

ALICE FENIQUITO  
1194 HYACINTH PLACE  
WELLINGTON, FL 33414

SUBJECT: ALICE I. FENIQUITO, M.D., P. A.  
Ref. Number: F63526

We have received your document for ALICE I. FENIQUITO, M.D., P. A. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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) 245-6908.

Anna Chesnut  
Document Specialist

Letter Number: 202A00059851

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DIVISION OF CORPORATIONS

**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, the undersigned corporation organized under the laws of the State of \_\_\_\_\_ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Alice I. Feniquito, M.D., P.A.

2. The mailing address of the corporation: 1194 Hyacinth Place  
Wellington, FL 33414

3. Date of incorporation/qualification: 4/14/99 Document number: F63526

4. The name and address of the current registered agent and registered office:

W.J. Tremblay  
1801 S. Federal Highway, Ste. 219  
Delray Beach, FL 33483

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

Alice I. Feniquito  
1194 Hyacinth Place  
Wellington, FL 33414

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.

Alice I. Feniquito M.D. P.A. 10/24/02  
(Signature of an officer, chairman or vice chairman of the board) (Date)

Alice I. Feniquito, President  
(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated corporation, 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.*

Alice I. Feniquito M.D. 11/4/02  
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name) (Capacity)

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

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