63850

| (Requestor's Name) (Address) (Address) | 600082854336 |
|---|---|
| (City/State/Zip/Phone #) | 01/02/0701012020 **35.00 |
| (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | O7 JAN -2 AM 10: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA |

Office Use Only

COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|---|--|
| · | | |
| SUBJECT: Mark H. Goldberg, P.A. (Name of Corporation) | | |
| (Name of Corporati | on) | |
| DOCUMENT NUMBER: F63850 | | |
| The enclosed Statement of Change of Registered Office/Agent | and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the f | following: | |
| · | | |
| Mark H. Goldberg | | |
| (Name of Contact Person) | | |
| | | |
| Mark H. Goldberg, P.A. (Firm/Company) | | |
| (Firm/Company) |) | |
| 4700 D . : D . ! 0 !! 404 | | |
| 4780 Davie Road, Suite 101 (Address) | | |
| (1144.000) | | |
| Davie, FL 33314-4426 | | |
| (City/State and Zip C | Code) | |
| For further information concerning this matter, please call: | | |
| Mark H. Goldberg | 254 252-5800 | |
| (Name of Contact Person) at (| 954 252-5800 Area Code & Daytime Telephone Number) | |
| | _ | |
| Enclosed is a \$35.00 check made payable to the Department of | State. | |
| | | |
| Mailing Address: Amendment Section | Street Address: Amendment Section | |
| Division of Corporations | Division of Corporations | |
| . P.O. Box 6327 | Clifton Building | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | |
| | Tallahassee, FL 32301 | |

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida. |
|--|--|
| 1. The name of t | the corporation: Mark H. Goldberg, P.A. |
| 2. The principal | office address: 4780 Davie Road, Suite 101, Davie, FL 33314-4426 |
| 3. The mailing a | address (if different): |
| 4. Date of incorp | poration/qualification: 1/20/82 Document number: F63850 |
| | d street address of the current registered agent and registered office on file with the timent of State: |
| | Mark H. Goldberg |
| | 5400 S. University Drive, Suite 601 |
| | Davie, FL 33328 |
| 6. The name and (if changed): | I street address of the new registered agent (if changed) and /or registered office |
| | Mark H. Goldberg |
| | 4780 Davie Road, Suite 101 |
| | (P.O. Box NOT acceptable) |
| | Davie, FL 33314-4426 |
| The street address changed will | ess of its registered office and the street address of the business office of its registered agent, be identical. |
| Such change wanthorized by the | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change. |
| - Mana | pre of in officer or director) mark 4 County Printed or typed name and title) |
| I hereby accept I further agree of my duties, ar document is be corporation ha | the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this implified merely to reflect a change in the registered office address, I hereby confirm that the speed in the speed of the property of this change. |
| | gnance of Registered Agent) 12 28/06 (Date) |
| If signing on be | rall of an entity: |
| Mark H. Gold | • |
| (| Typed or Printed Name) |

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