## F97615

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Stewart Cohen, P. A.  (Name of Corporation)
DOCUMENT NUMBER: F97615
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:
Stewart Cohen
(Name of Contact Person)
Stewart Cohen, P. A.  (Firm/Company)
(Firm/Company)
1510 E. Colonial Drive, Suite 305 (Address)
(Address)
Orlando, FL 32803
(City/State and Zip Code)
For further information concerning this matter, please call:
Stewart Cohen at ( 407 ) 894-1888
Stewart Cohen at (407) 894-1888  (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, statement of change is submitted for a corporation organized in order to change its registered office or registered.	ed under the laws of the State of Florid	а	<del></del>	
1. The name of the corporation: Stewart Cohen, P. A.				
2. The principal office address: 1510 E. Colonial Drive, Sui	ite 305 (new address)			
Orlando, FL 32803		<u> </u>	<u> </u>	
3. The mailing address (if different): same		<b>7</b> 00	기품 -	
		HAE I	_ <del>~</del> ~	***
4. Date of incorporation/qualification: 9/1/82	Document number: F97615	SEY C	5	; <u> </u>
5. The name and street address of the current registered age Florida Department of State:	ent and registered office on file with the	OF STATE	AH 10: 53	כ
Stewart Cohen		₩ NDA	ີ່	
15167 E. Hillcrest Street, Suite 2	04			
Orlando, FL 32803				
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office			
Stewart Cohen				
1510 E. Colonial Drive, Suite 305	5			
(P.O. Box NOT acceptable)				
Orlando, FL 32803				
The street address of its registered office and the street as changed will be identical.	ddress of the business office of its regi	stered a	agent,	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been noti	by its board of directors or by an offic- fied in writing of the change.	er so		
Chlu IV	Stewart Cohen			
(Signature of an officer or director)  Thereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut of my duties, and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change.	(Printed or typed name and title) agree to act in this capacity, es relative to the proper and complete ation of my position as registered age registered office address, I hereby cor	perfor nt. Or, nfirm th	mance if this at the	3
(1tm)/()	May 23, 2007			
(Signature of Registered Agent)	(Date)			
If signing on behalf of an entity:				
(Typed or Printed Name)				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)