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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Louis M. Silber, P.	Α.
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
Louis M. Silber, Esq. Name of Person	_
Louis M. Silber, P. A. Firm/Company	_
105 S. NArcissus Aue., S	ivite 402
West Palm Beach, FL 33' City/State and Zip Code	401
E-mail address: (to be used for future annual report notific	ation)
For further information concerning this matter, please call:	
Louis M. Silber at (56)	615-6262
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

S≥ \$25 Filing Fee

Enclosed is a check for the following amount:

, 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 FLouda.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Louis M. Silber, P.A.
2. The principal office address: 105 5. NAYCISSUS Avenue, Suite 402
West Palon Beach, FL 33401
3. The mailing address (if different):
4. Date of incorporation/qualification: 06 01 1983 Document number: 642122
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)
1806 Old Obeechobee Road
West Palm Beach, FL 33401
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
105 S. NARCISSUS Avenue
Suite 402
Suite 402 P.O Box NOT acceptable West Palm Seach, FL 33401
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.
2001s Silber
Signature of an officer or director 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.
100.20 8.20.20
Signature of Registered Agent Date
If signing on behalf of an entity:
Louis Silber
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 (04/13)

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3. The mailing address (if different):
4. Date of incorporation/qualification: 06/01/1983 Document number: 642122
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)
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6. The name and street address of the new registered agent (if changed) and /or registered office 27
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Signature of Registered Agent Date
If signing on behalf of an entity: .
Louis Silber
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