H75187

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
_
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
į

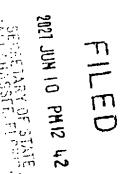
Office Use Only



700367926237

RA Charge

08/10/21--0:029--012 **35.00



JUL 1 8 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Roy J. Kahn, P.A. Name of Corporation
DOCUMENT NUMBER: H 75187
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:
Roy J. Kahn Name of Contact Person Roy J. Kahn, P.A. Firm/Company 420 S. Dixie Highway Suite 4B Address Cova L bables FL. 33146 City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Roy J. Kahn at (305) 358-7400 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

Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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 Floride
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Roy J. Kahn P.A. 2. The principal office address: 420 S. Dixie Highway, Suite 4B S. Dixie thighway, Cosal 60 bles FL. 33146
2. The principal office address: 920 5. 31210 41210 4121
2. The state of th
3. The mailing address (if different): 4. Date of incorporation/qualification: 1/10/19 85 Document number: 475/87
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)
Roy J. Kahn
Roy J. Kahn 800 Brickell Ave. Suite 1400 Miami, FL. 33131
Miami, FL. 33/31
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Roy J. Kahn
Roy J. Kahn 420 S. Dixie Highway, Suite 48 P.O. Box NOT acceptable
COVal bables FL. 33146
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 Roy T. Kahn pulsident 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 6/7/21 Date
If signing on behalf of an entity:
Roy J. Kahn Avped 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