## H90298

(Re	questor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	or Status			
Special Instructions to	Filing Officer:				
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BUTTO THE PERSON PROPERTY.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: Sned & Tuc	ker, P.A.				
	(Name of Corporation)				
DOCUMENT NUMBER: H90298					
The enclosed Statement of Change of I	Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence conce	rning this matter to the following:				
	g.				
	William H. Sned, Jr.				
(Name of Contact Person)					
	Sned & Tucker, P.A.				
	(Firm/Company)				
3030 S. Dixie	Hwy., Suite 5				
	(Address)				
West Palm Bea	ch, FL 33405-1539				
	(City/State and Zip Code)				
For further information concerning this	s matter, please call:				
Linda Roberts	ot/ 561 \ 655_8631 owt 105				
(Name of Contact Person	at (561) 655-8631, ext. 105 on) (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made paya	hle to the Department of State				
======================================	so to the Department of State.				
Mailing Addr	ess: Street Address:				
Amendment :	Section Amendment Section				
Division of (	•				
P.O. Box 632	· · · · · · · · · · · · · · · ·				
Tallahassee,					
	Tallahassee, FL 32301				

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

statement of char	provisions of sections 607.0502, of the sections of sections of the section of sections of the sections of the sections of the section of the	n organized under the laws of	the State of Florida
	ne corporation: Sned &	-	5240
2. The principal of	office address: 3030 S. Di		
		Beach, FL 33405-1539	
3. The mailing ac	Idress (if different): Same	as above.	
4. Date of incorp	oration/qualification: 12/17/	1985 Document numb	er: <u>H90298</u>
5. The name and Florida Depart	street address of the current regis	stered agent and registered off	ice on file with the
	The only change	ge is the zip code:	
	Old zip code:list	ed on Principal Addr	ess: 33402 🚉 👝
	Old zip code list	ed on Mailing Addres	ess: 33402 ALARA SSET
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or	registered office
	Correct zip code of P	rincipal Address: 3	3405-1539 SS - C
	Correct zip code of Ma	ailing Addres: 3	3405-1539
	(P.O. Box NOT	acceptable)	
The street addre as changed will	ss of its registered office and the	e street address of the busines	ss office of its registered agent,
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board of direct been notified in writing of the	tors or by an officer so e change.
(Signatu	re of all officer or disastion	William H.	Sned, Jr., President typed name and title)
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered a o comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this		capacity, operations of the complete performance as registered agent. Or, if this dress, I hereby confirm that the
	ange of Registered Age	nt; same as listed.	N/A
· · · ·	nature of Registered Agent)		(Date)
If signing on bel	•		
N/.	yped or Printed Name)	<del>-</del> <del>-</del>	
(1		ING FEE: \$35.00 * * *	

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