

J00718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

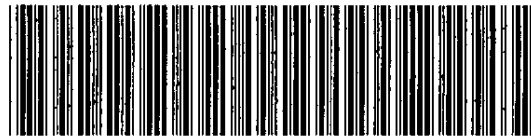
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL -2 AM 8:31

RD/chg
@ 7/2/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Weiner, Aronson & Mankoff, P.A.
(Name of Corporation)

DOCUMENT NUMBER: J00718

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:

Carole Aronson
(Name of Contact Person)

Weiner, Aronson & Mankoff, P.A.
(Firm/Company)

10 SE 1st Ave., Suite C
(Address)

Delray Beach, FL 33444
(City/State and Zip Code)

For further information concerning this matter, please call:

Carole Aronson at (561) 265-2666
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2008

CAROLE ARONSON
WEINER, ARONSON & MANKOFF, P.A.
10 SE 1ST AVE., SUITE C
DELRAY BEACH, FL 33444

SUBJECT: WEINER, ARONSON & MANKOFF, P.A.
Ref. Number: J00718

We have received your document for WEINER, ARONSON & MANKOFF, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are changing the registered agent you must list the new agent in part 6 of the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 208A00037277

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TALLAHASSEE, FLORIDA

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Weiner, Aronson & Mankoff, P.A.
2. The principal office address: 10 SE 1st Ave., Suite C, Delray Beach, FL 33444
3. The mailing address (if different): 10 SE 1st Ave., Suite C, Delray Beach, FL 33444
4. Date of incorporation/qualification: 02/24/1986 Document number: J00718
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

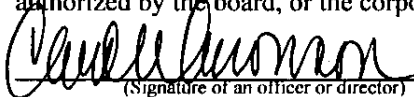
Weiner, Michael S.
102 North Swinton Avenue
Delray Beach, FL 33444, US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Michael S. Weiner
10 SE 1st Ave., Suite C
(P.O. Box NOT acceptable)
Delray Beach, FL 33444

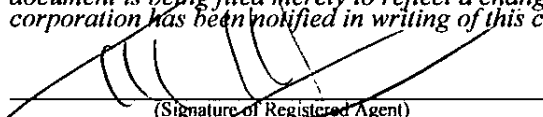
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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)

Carole Aronson, Vice President
(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)

June 30th 2008
(Date)

If signing on behalf of an entity:

(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 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL -2 AM 8:34