

J44592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2011 APR 18 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TBrown 4-20-11

**JAMES J. DORL, P.A.**

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April 15, 2011

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE:** Change of Registered Agent

Gentlemen:

In order to change the name of the Registered Agent for

Keys Animal Hospital, Inc.. . . . . Document No. J44592

enclosed is the Statement of Change and \$35.00 filing fee.

Thank you. Should you have any questions, or require further information, please do not hesitate to contact our office.

Very truly yours,

JAMES J. DORL, P.A.

By:

  
Dona Marie Varney, Legal Assistant

/dmh  
Encs.

**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: KEYS ANIMAL HOSPITAL, INC.
2. The principal office address: 11425 Overseas Highway  
Marathon, FL 33050
3. The mailing address (if different): 11425 Overseas Highway  
Marathon, FL 33050
4. Date of incorporation/qualification: Dec. 2, 1986 Document number: J44592
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)

William N. DeVane, Jr.

5701 Overseas Highway, Suite 12

Marathon, FL 33050

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

James J. Dorl

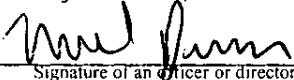
5701 Overseas Highway, Suite 12

P.O. Box NOT acceptable

Marathon, FL 33050

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

Michael Dunn 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

April 14 2011  
\_\_\_\_\_  
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)

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