K16801

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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TO:

TO:	Amendment Section Division of Corporations	
SUBJ Name	JECT: Friedman & Greenberg, P.A.	
DOC	UMENT NUMBER: K 16801	
The e	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this	s matter to the following:
Rober	t D. Friedman	
Name	of Contact Person	
Friedr	nan & Greenberg, P.A.	
Firm/	Company	
8181	West Broward Boulevard, Suite 300	
Addre	ess	
	ition, FL 33324	
City/S	State and Zip Code	
	rfriedman@friedmangreenbe	rg.com
E-ma	il address: (to be used for future annua	l report notification)
For fu	urther information concerning this matter,	please call:
Rober	t D. Friedman	at (954)370-4774 Area Code & Daytime Telephone Number
_	Name of Contact Person	Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	ange is submitted for a corporation orga	the state of the State of Florida Statutes, this state of Florida state of Florida state of Florida.		
1. The name of	the corporation: Friedman & Greenberg,	P.A		
2. The principal	office address: 8181 West Broward Boul	evard, Suite 300		
	Plantation, FL 33324			
	address (if different):			
4. Date of incom	poration/qualification: 3/3/1988	Document number: K16801		
	d street address of the current registered rtment of State: (If resigned, enter resign	agent and registered office on file with the ned)		
	Robert D. Friedman			
	9675 West Broward Boulevard			
	Plantation, FL 33324			
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered office		
	Robert D. Friedman			
	8181 West Broward Boulevard, Suite 300			
	P.O. Box NOT acceptable			
	Plantation, FL 33324			
The street address changed will	ess of its registered office and the stree be identical.	t address of the business office of its registered agent,		
Such change wa authorized by th	as authorized by resolution duly adopte he board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.		
A R		Robert D. Friedman, President/Director		
	re of all officer or director	Printed or typed name and title		
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent a to comply with the provisions of all sta id I am familiar with and accept the ob ing filed merely to reflect a change in t s been notified in writing of this chang	nd agree to act in this capacity. tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the e.		
	nature of Registered Agent	8/10/2022 Date		
If signing on be	chalf of an entity:			
T	yped or Printed Name * * * FILING F	EE: \$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)