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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : BUSH ROSS, P.A.
Account Number : I19990000150
Phone : (813) 224-9255
Fax Number : (813) 223-9620

Celeste Perrino
(999999-99999)

RECEIVED

2008 JUL 16 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

MICHAEL A. SIP, D.M.D., P.L.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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((H08000174356 3))

COVER LETTER

To: Registration Section
Division of Corporations

SUBJECT: Michael A. Sip, D.M.D., P.L.
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Celeste Perrino
(Name of Person)

Bush Ross, P.A.
(Firm/Company)

1801 North Highland Avenue
(Address)

Tampa, Florida 33602
(City/State and Zip Code)

For further information concerning this matter, please call:

Celeste Perrino at (813) 204-6425
(Name of Contact Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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INHS18 (8/05)

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 617.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the limited liability company is: Michael A. Sip, D.M.D., P.L.
- 2. The mailing address of the limited liability company is: 110 Knights Avenue
Brandon, FL 33510
- 3. Date of filing/registration if Florida: 7/23/2002
- 4. Document number: L02000018580

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Brent A. Jones
220 S. Franklin Street
Tampa, FL 33602

6. The name and address of the new registered agent and/or office:

Bush Ross Registered Agent Services, LLC
Name

1801 North Highland Avenue
Florida street address (P.O. Box NOT acceptable)

Tampa, Florida 33602
City, State and Zip

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 TALLAHASSEE FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Michael Sip
(Signature of a member or authorized representative of a member)

Michael A. Sip
(Printed or typed name of signer)

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 as provided for in Chapter 608, F.S.. Of, 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.

Celeste Perrino, Vice President
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

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