

108000029594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

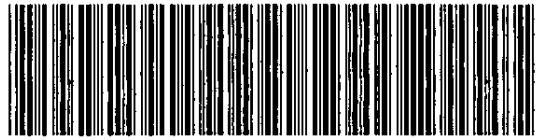
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200161215412

10/06/09--01026--004 **25.00

FILED
2009 OCT -6 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

108- 29594

M. THOMAS
OCT 7 2009
EXAMINER

BRONSTEIN, CARLSON, GLEIM & SMITH, P.A.

Joel D. Bronstein,
Board Certified in Tax Law

Susan W. Carlson
Board Certified in Tax Law

Holger D. Gleim
Board Certified in Wills, Trusts & Estates

Thomas B. Smith
Board Certified in Health Law

Suite 1100
150 Second Avenue North
St. Petersburg, Florida 33701-3355

(727) 898-6688
Fax (727) 898-8811

Writer's E-Mail Address:
stthomas@bcgs-law.com

Writer's Direct Dial No.

Refer to File No.

20091043

(727) 898-6690

October 1, 2009

Registered Agent/Address Section
Bureau of Corporate Records
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32314

RE: Eye Physicians of Central Florida, P.L.C.

Gentlemen:

Enclosed please find two originals of the Change of Registered Office and Agent documents for the referenced professional liability Florida company along with our client's check in the amount of \$25.00 representing the filing fee.

Please acknowledge filing of this document by stamping one of the originals and returning same to me.

If you have any questions in connection with the documents, or need further information, please contact me by telephone rather than returning the document.

Very truly yours,


Sue Thomas, CP, FRP
Paralegal to Joel D. Bronstein

ST/sb
Enclosures

FILED
2009 OCT -6 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHANGE OF REGISTERED OFFICE AND AGENT
OF
EYE PHYSICIANS OF CENTRAL FLORIDA, P.L.C.

TO: SECRETARY OF STATE OF FLORIDA

1. The name of the Professional Limited Liability Company is EYE PHYSICIANS OF CENTRAL FLORIDA, P.L.C.
2. The current registered office is located at 430 N. Mills Ave., Suite 4, Orlando, Florida 32803.
3. The registered office shall be changed to 249 Moray Lane, Winter Park, Florida 32792.
4. The current registered agent is Ivan M. Lefkowitz.
5. The successor registered agent will be Robert S. Gold.
6. All changes made above have been authorized by the Professional Limited Liability Company's Members as authorized by the Operating Agreement.


DATED: September 11, 2009

EYE PHYSICIANS OF CENTRAL FLORIDA, P.L.C.

By: 
Robert S. Gold, Member

ACKNOWLEDGMENT

I hereby accept to act in this capacity, and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of 607.608, Florida Statutes.


Robert S. Gold
Registered Agent

2009 OCT -6 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED