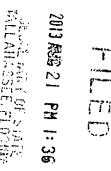
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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO: Registration Section Division of Corporations Coleen L Dooley ARNP PLLC 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: Coleen L Doolev Coleen L Dooley ARNP PLLC Firm/Company 2409 N Roosevelt Blvd #6 Address Key West, FL 33040 coleendooley@msn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Coleen Dooley

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Name of Person

MAILING ADDRESS:

Area Code & Daytime Telephone Number

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee: & Certified Copy

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

•	•				
I. Na	me of the limited liability company: Coleen L Dooley	ARNP PLLC			
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2. (a)	Principal office address of limited liability compa				
(Note: MUST BE STREET ADDRESS)		Key West, FL 33040		 	
(h)	Mailing address of limited lightlife, someone.	Coleen Dooley			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		PO Box 420348		·····	
		Summerland Key, FL 33042	70 53		
		Detilitional to 112 years			
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September 21, 2010		10000098872	<u>アン 源</u> で - 概		
3. Date of filing/registration in Florida		4. Document number	(0)	and the or	
			<u>(γ)</u>	ļ	
5. (a) Registered Agent and Registered Office shown of	n the records of the Florid	a Dept. of Sta	ite:	
Registered Agent:			_ii	#** ···	
	Registered Agent:	Corporation Service Company	- C		
	D 14 1000 411	4004 May 100	<u>နိုင်</u> မ		
	Registered Office Address:	1201 Hays St	<u> </u>		
		Tallahassen, IFL 32301			
	NEW Registered Agent:	Coleen L Dooley			
	NEW Registered Office Address:	2409 N Rocisevelt Blvd			
	(MUST BE FLORIDA STREET ADDRESS)	Suite 6			
		Key West	,FL_330	140	
confir and the liabilithe m the op	limited liability company is not organized under the med that after the change or changes are made, the ne business office of the registered agent will be idently company, it is hereby confirmed that the changed embers of the limited liability company or as other perating agreement of the limited liability company. The of a member or authorized representative of a member	Florida street address of the original. Or, in the case of a (s) was/were authorized by wise provided in the article	he registered i Florida limit zan affirmativ	office ed ve vote of	
	L Dooley or typed name of signee	· 			
I here compl and I Chapt addre	eby accept the appointment as registered agent and y with the provisions of all statutes relative to the pam familiar with and accept the obligations of my per toos, F.S. Or, if this document is being filed to its, I hereby confirm that the limited liability compa	agree to act in this capac proper and complete perfo position as registered ager nerely reflect a change in t ny has been notified in wr	ity. I further rmance of my at as provided the registered iting of this c	agree to duties, for in office hange.	

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

Signature of Registered Agent