L11000095377

(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:		
B. KOHR MAR 2 8 2012 EXAMINER		



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03/26/12--01016--028 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	ALEXANDRA KEHOE, OD PLLC Name of Limited Liability Company
Dear Sir or Madam: ,	
The enclosed Registered Agent/F	Registered Office Change and fee(s) are submitted for filing
Please return all correspondence	ALEXANDRA KEHOE, OD PLLC Name of Limited Liability Company Registered Office Change and fee(s) are submitted for filing concerning this matter to the following:
DR. ALEXANDF Name of Pers	RA KEHOE SO
ALEXANDRA KEH	
2107 SE 10TH Address	AVE #831
FORT LAUDERDA City/State and Zip	
KEHOE.OD@G E-mail address: (to be used for future	MAIL.COM annual report notification)
For further information concerning	ng this matter, please call:
DR. ALEXANDRA KEH	Area Code & Daytime Telephone Number
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327
Enclosed is a check for t	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.

Name of the limited liability company:	ALEXANDRA KEHOE, OD PLLC
2. (a) Principal office address of limited liability of	company: 3599 W HILLSBORO BLVD
(Note: MUST BE STREET ADDRESS)	DEERFIELD BEACH, FL 33442
(b) Mailing address of limited liability company	y: 2107 SE 10TH AVE #831
(Note: MAY BE POST OFFICE BOX)	FORT LAUDERDALE, FL 33316
01/05/2012	L11000095377
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office she	own on the records of the Florida Dept. of ste:
Registered Agent:	ALEXANDRA N KEHOE
Registered Office Address:	2107 SE 10TH AVE #831 FORT LAUDERDALE, FL 33316
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW</u> Registered Agent:	ALEXANDRA N KEHOE
NEW Registered Office Address:	2001 N FEDERAL HWY
(MUST BE FLORIDA STREET ADDRES	(S) #G104
•	POMPANO BEACH ,FL 33062
liability company, it is hereby confirmed that the close of the members of the limited liability company or or the operating agreement of the limited liability c	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
Signature of a member or authorized representative of a member	
ALEXANDRA KEHOE Printed or typed name of signee	
	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, if my position as registered agent as provided for in a did not reflect a change in the registered office company has been notified in writing of this change.

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

Signature of Registered Agent