M20904

(Re	equestor's Name)			
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(City/State/Zip/Phone #)				
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COVER LETTER

TO:	Amendment Section		
	Division of Corporations		

SUBJECT:	Nabil A. Mat	ar, M.D. P.A.	
	Name o	of Corporation	
DOCUMENT NUM	BER:	M20904	
The enclosed Stateme	ent of Change of Registered O	ffice/Agent and fee are submi	tted for filing.
Please return all corre	espondence concerning this ma	atter to the following:	
	Nab	il A. Matar	
_	Name of	Contact Person	
Nabil A. Matar M.D. P.A.			
	Firn	n/Company	
	633 NE 167th	Street - Suite 1111	
_		Address	
_	North Miami	Beach, FL 33162 e and Zip Code	
_	City/Stat	e and Zip Code	
. <u>E</u>	-mail address: (to be used for	or future annual report notin	fication)
For further information	on concerning this matter, plea	se call:	
	labil A. Matar	at (305) Area Code & Dayti	651-8558
Name	of Contact Person	Area Code & Dayti	me Telephone Number
Enclosed is a \$35.00	check made payable to the Dep	partment of State.	
	Mailing Address:	Street Address:	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Nabil A. Matar M.D. P.A. 2. The principal office address: 633 NE 167th Street; North Miami Beach, FL 33162	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 9/23/1985 Document number: M20904	
 The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) 	
Nabil A. Matar	
100 NW 170th Street - Suite 207	
North Miami Beach, FL 33169	_
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Nabil A. Matar 633 NE 167th Street - Suite 1111 P.O. Box NOT acceptable North Miami Beach, FL 33162	CORE TOSS
633 NE 167th Street - Suite 1111	1
P.O. Box NOT acceptable	ζ.
North Miami Beach, FL 33162	,
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the comporation has been notified in writing of the change.	
Nabil A. Matar, President Signature of an other of director Printed or typed name and title	
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been fotified in writing of this change.	
11/19/2010	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Nabil A. Matar Typed or Printed Name	
* * * FILING FEE: \$35.00 * * *	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)