N17000000995

(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

400306502424

12/11/17--01009--003 **35.00

FILED
2017 DEC 11 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA/RD/ch8

DEC 12 2017

I ALBRITTON

# COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Financial Planning Association of South Florida, Inc.
Name of Corporation

DOCUMENT NUMBER: N00000000995

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua S. Davis
Name of Contact Person

Davis Private Wealth, LLC
Firm/Company

1035 State Road 7, Suite 315-14
Address

Wellington, FL 33414
City/State and Zip Code

josh@davisprivatewealth.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joshua S. Davis at (561) 284-8999
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Department of State.

**Mailing Address:**
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:**
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

**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: The Financial Planning Association of South Florida, Inc.

2. The principal office address: 1035 State Road 7, Suite 315-14, Wellington, FL 33414

3. The mailing address (if different): Same as Above

4. Date of incorporation/qualification: February 2000 Document number: N00000000995

5. 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)

Linda M. Wolonick

8930 State Road 84, No. 316

Davie, FL 33324

FILED
2017 DEC 11 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Joshua S. Davis

1035 State Road 7, Suite 315-14

P.O. Box NOT acceptable

Wellington, FL 33414

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 corporation has been notified in writing of the change.

Linda M. Wolonick
Signature of an officer or director

Linda M. Wolonick, Executive 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 notified in writing of this change.*

Signature of Registered Agent

12/7/2017
Date

If signing on behalf of an entity:

Joshua S. Davis
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 (03/12)