Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000120650 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : HARBOUR BUSINESS LAW

Account Number : 120220000103 Phone : (813)706-7333 Fax Number : (813)330-3039

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: AnnualReports@HarbourBusinessLaw.com

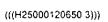
REGISTERED AGENT CHANGE TAMPA BAY PARALEGAL ASSOCIATION, INC.

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Amendment Section

18133303039

From: Katalyn Dougharty

COVER LETTER

TO:

(((1125000120650 3)))

Name of Contact Person Area Code & Daytime To	elephone Number
KATELYN J. DOUGHERTY at (813) 706-7333	
For further information concerning this matter, please call:	
E-mail address: (to be used for future annual report notification)	SECRETARY NO STALLARY
ANNUALREPORTS@HARBOURBUSINESSLAW.COM	
City/State and Zip Code	of programme and the second se
TAMPA, FL 33602	
Address	一
400 N. ASHLEY DRIVE, SUITE 1900	\$0 B -
Firm/Company	200
HARBOUR BUSINESS LAW	
Name of Contact Person	
KATELYN J. DOUGHERTY	
Please return all correspondence concerning this matter to the following:	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for	or filing.
DOCUMENT NUMBER: N08000008022	_
Name of Corporation	
SUBJECT: TAMPA BAY PARALEGAL ASSOCIATION, INC.	
Envision of Corporations	
Division of Corporations	

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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

CR2E045 (04/13)

18133303039

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

	provisions of sections 607.0502, 617,0502 inge is submitted for a corporation organi		
	r to change its registered office or registe		
1. The name of	the corporation: TAMPA BAY PARALEG	AL ASSOCIATION, INC.	
2. The principal	office address: 8411 EDGEWATER PLAC	E BLVD., TAMPA, FL 33615	
3. The mailing a	poration/qualification: P.O. BOX 2840, TAN poration/qualification:	1PA, FL 33601	
4. Date of incor	poration/qualification: 08/26/2008	Document number: N08000008	022
	d street address of the current registered ag rtment of State: (If resigned, enter resigned		the
	HARBOUR BUSINESS LAW		~>
	200 N. PIERCE STREET, SUITE 2A	<u> </u>	925 A BECR
			S APR -7
6. The name and (if changed):	d street address of the new registered agen	▶	*
	HARBOUR BUSINESS LAW		О
	400 N. ASHLEY DRIVE, SUITE 1900		• -
	P.O. Box TAMPA, FL 33602	NOT acceptable	
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its	registered agent.
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an orified in writing of the change.	fficer so
Signalu	usnits C. Seriono re of an officer of director	Juanita C. Serrano, Board President Printed or typed name and tute	
l further agree : if my duties, an locument is bei	the appointment as registered agent and to comply with the provisions of all statu ad I am familiar with and accept the oblig ing filed metely to reflect a change in the scheen notified in writing of this change.	tes relative to the proper and comp gation of my position as registered (lete performance agent. Or, if this confirm that the
Tribiter .	10 Do XX	APRIL 3, 2025	
C-Sig	mature of Registered-Agents-	Date	
If signing on be	half of an entity:		
	nerty, Esq., Founding Attorney		
Ţ	yped or Printed Name * * * FILING FEI	F · \$25 (10 * * *	
	" " " F J J . I . N C r P F . I	C	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314