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NACKG

AUG 2 7 2015

R. Sentiff

COVER LETTER

Division of Corporations
SUBJECT: NUMERIA PUNCE PARTICION INC. Name of Corporation
DOCUMENT NUMBER: N21229
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:
MILLIA MILLIAN STATE Name of Contact Person
Niethast Florida Parallagal Assituation, Mc.
221 N. Hugan Swelt. Bux 119 Address
Jackion Wille Ft 32702 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (901) 1829-1818 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

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 Mills in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: Notwork Physica Poraligial Association, Inc.		
2. The principal office address: 221 N Hogan In 21, Bux 169		
Jacksonville Ft 32202		
3. The mailing address (if different):		
4. Date of incorporation/qualification: Stilly 15, 1988 Document number: N272	28	
5. The name and street address of the current registered agent and registered office on file version of State: (If resigned, enter resigned)	vith the	
SMILL & HULLY	-	
Holiving Building, 225 Water Street, Suite 1800 Julisionville, FL 32262		
Julistonville, FL 32262		
6. The name and street address of the new registered agent (if changed) and /or registered or (if changed):		
Ansbour lâw la	5: 21 Login	
P.O. Box NOT acceptable		
Jaukistwille fr 32217		
The street address of its registered office and the street address of the business office of it as changed will be identical.	ts registered agent,	
Such change was authorized by resolution duly adopted by its board of directors or by an authorized by the board, or the corporation has been notified in writing of the change.	officer so	
Signature of an officer or director All Vol Alfris Syrsides the Printed or typed name and to	lle	
l 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 con performance of my duties, and I am familiar with and accept the obligation of my position agent. Or, if this document is being filed merely to reflect a change in the registered offic hereby confirm that the corporation has been notified in writing of this change.	nplete n as registered ce address, I	
Signature of Registered Agent Date	5	
If signing on behalf of an entity:	2 4	
Barry B. Ansbacher for Ansbacher Lau Typed or Printed Nance	, <i>P</i> , A,	

* * * FILING FEE: \$35.00 * * *