POODO Lisa Smith	000	6915
Requester's Name	-	
POBOX 263		
Address		
Havana FL 32333	487-0694	·
City/State/Zip Phone #		
		Office Use Only
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (i	f known):
1. <u>Deborah</u> Zurschmiede (Corporation Name)	(Document #)	Notes and the solid relative value had been solid at the
(Corporation Name)	(Document#)	SEC
2.		
(Corporation Name)	(Document #)	RETARKS TO THE
2		LED LED SSEE, FLOR
3. (Corporation Name)	(Document #)	
		32 32
4. (Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
Walk in Pick-up time		Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	<b>AMENDMENTS</b>	2000032128025 -04/18/0001063008 *****35.00 ******35.00
☐ Profit	☐ Amendment	***************************************
Not for Profit	_ /	.A., Officer/Director
Limited Liability	Change of Regist	tered Agent
☐ Domestication ☐ Other	Dissolution/With Merger	ndrawai F D
C Other	- Micigol	ASSOCIATION
OTHER FILINGS	REGISTRATION/Q	DUALIFICATION
Annual Report	☐ Foreign	DUALIFICATION SENTING STATE OF
Fictitious Name	Limited Partners	hip Salam & O
	Reinstatement	3, 3
	☐ Trademark	

☐ Other

T. LEWIS APR 1 8 2000

**Examiner's Initials** 

CR2E031(7/97)

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

Pursuant to the provisions of sections 607.0502, 617.0502, the undersigned corporation organized under the laws of the	607.1508, or 617.1508, Florida Statutes, State of Florida
the undersigned corporation organized under the terms of the submits the following statement in order to change its regist the State of Florida.	ered office or registered agent, or both, in
1. The name of the corporation is: <u>Deborah</u> Zurso	chmiede, P.H.D., P.A
2. The mailing address of the corporation is: 2729 Blan	irstone Lane
Tallahussee, F1 32301	
3. Date of incorporation/qualification: 1/14/00	Document number: <u>P00000006915</u>
4. The name and address of the current registered agent and o	
Lisa A Smith	Ts 8
124 Marriott Drive, Sui	te 203
Tallahassee, FL 323	Ce: (P. O. Box Not Acceptable)
5. The name and address of the new registered agent and offi	ce: (P. O. Box Not Acceptable)
Deborah Zurschmiede	te 203  OI  ce: (P. O. Box Not Acceptable)  FLORA
2729 Blairstone Lane	32 ROLL 32
Tallahassee, F1 32301	
The street address of its registered office and the street address agent as changed will be identical.	ress of the business office of its registered
Such change was authorized by resolution duly adopted by authorized by rife board.	its board of directors or by an officer so
M. horah Sunchmech	4/05/00
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Deborah Zurschmiede - Preside (Printed or typed name and title)	ent_
Having been named as registered agent and to accept serv corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accept registered agent.	relative to the proper and complete
I eliowh Sinchweel	4/05/00
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	President
Deburah Zurschmiede  (Typed or Printed Name)	(Capacity)

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