

POD0000092232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

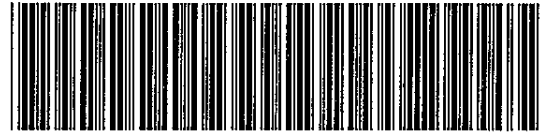
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100062184151

12/19/05--01046--007 **35.00

FILED
05 DEC 19 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RO chs.
sf

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HARRIS BROWN, P.A. / CHANGE OF ADDRESS OF REG. AGENT
(Name of Corporation)

DOCUMENT NUMBER: P00000092232

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:

PATRICIA LEBLANC
(Name of Contact Person)

HARRIS BROWN, P.A.
(Firm/Company)

6 EAST BAY STREET, STE 301
(Address)

JACKSONVILLE, FL 32202
(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA LEBLANC at (904) 354-0624
(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

**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: HARRIS BROWN, P.A.
2. The principal office address: 6 EAST BAY STREET, STE 301
JACKSONVILLE, FL 32202
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: P00000092232

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

HARRIS BROWN
12 EAST BAY STREET
JACKSONVILLE, FL 32202

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

HARRIS BROWN
6 EAST BAY STREET STE 301
(P.O. Box NOT acceptable) 1
JACKSONVILLE, FL 32202

FILED
05 DEC 19 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

HARRIS BROWN
(Signature of an officer or director)
PRINTED

[Signature]
(Printed or typed name and title)
SIGNATURE

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)

(Date)

If signing on behalf of an entity:

(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)