

P00000/16938

Arden M. Siegendorf, P.A.  
2640-A Mitcham Drive  
Tallahassee, FL 32308

City/State/Zip

Phone #

000004460220--9  
-07/05/01--01072--003  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

FILED STATE  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATION  
01 JUL 19 PM 12:22

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

*R A Chg.*

V. SHEPARD JUL 25 2001

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 12, 2001

ARDEN M. SIEGENDORF, P.A.  
2640-A MITCHAM DRIVE  
TALLAHASSEE, FL 32308

SUBJECT: ARDEN M. SIEGENDORF, P.A.  
Ref. Number: P00000116938

We have received your document for ARDEN M. SIEGENDORF, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida corporation or limited liability company or a foreign corporation or limited liability company authorized to transact business in Florida. Please correct the document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6909.

Velma Shepard  
Corporate Specialist

Letter Number: 501A00041157

RECEIVED  
01 JUL 19 AM 8:31  
DIVISION OF CORPORATIONS

**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,  
the undersigned corporation organized under the laws of the State of Florida  
submits the following statement in order to change its registered office or registered agent, or both, in  
the State of Florida.

1. The name of the corporation : Arden M. Siegendorf, P.A.
2. The mailing address of the corporation : 2640-A Mitcham Drive  
Tallahassee, Florida 32308
3. Date of incorporation/qualification: 1/1/01 Document number: P00000116938
4. The name and address of the current registered agent and office:

Spiegel and Utre, P.A.

343 Almeria Avenue

Coral Gables, Florida 33134

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

Carroll and Company, CPA's PA

2640-A Mitcham Drive

Tallahassee, Florida 32308

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.

AMS  
(Signature of an officer, chairman or vice chairman of the board)

6-27-01  
(Date)

Arden M. Siegendorf, President

(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated corporation, 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.*

Frederick Carroll III  
(Signature of Registered Agent)

6-26-01  
(Date)

If signing on behalf of an entity:

Frederick Carroll III

(Typed or Printed Name)

President

(Capacity)

for Carroll, Cutright & Richardson, CPAs

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