

PO1000034996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 22 AM 11:00

R.A. Charge
C.COULLIETTE

APR 25 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAN-L CONSULTING INC
Name of Corporation

DOCUMENT NUMBER: PO1000034996

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:

DANIEL LEZNEVICH
Name of Contact Person

DAN-L CONSULTING
Firm/Company

12018 CRANEFOOT DR
Address

JACKSONVILLE, FL 32223
City/State and Zip Code

DANNYLEZ@PEOPLEPC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANIEL LEZNEVICH at (904) 673-7247
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: DAN-L CONSULTING INC.
2. The principal office address: 12018 CRANEFOOT DR
JACKSONVILLE, FL 32223
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2001 Document number: P01000034996
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SPIEGAL + UTRERA, P.A.
343 ALMERIA AVE (RESIGNED)
CORAL GABLES, FL 33134

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

DANIEL LEZNEVICH
12018 CRANEFOOT DR
P.O. Box NOT acceptable
JACKSONVILLE, FL 32223

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.

Daniel Leznevich
Signature of an officer or director

DANIEL LEZNEVICH Sdr Prop.
Printed or typed name and title

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.

Daniel Leznevich
Signature of Registered Agent

4-18-11
Date

If signing on behalf of an entity:

DANIEL LEZNEVICH
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 22 AM 11:30