

P01000090338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

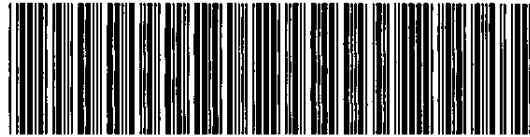
(Business Entity Name)

(Document Number)

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**C. MUSTAIN**

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** McKissock Corp.  
Name of Corporation

**DOCUMENT NUMBER:** P01000090338

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:

Matt McKissock  
Name of Contact Person

McKissock Corp  
Firm/Company

4769 The Grove Drive, Ste 100  
Address

Windermere, FL 34786  
City/State and Zip Code

drmatth@windermere dentist.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matt McKissock at 407, 909-1099  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 16, 2012

MATT MCKISSOCK  
4769 THE GROVE DR., STE 100  
WINDERMERE, FL 34786

SUBJECT: MCKISSOCK CORP.  
Ref. Number: P01000090338

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

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6050.

Carol Mustain  
Regulatory Specialist II

Letter Number: 812A00025523

**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: McKissack Corp
2. The principal office address: 4769 The Grove Drive, Ste 100  
Windermere, FL 34786
3. The mailing address (if different): ~~McKissack Corp, 1840 SW 22nd St, Miami, FL 33145~~ Same
4. Date of incorporation/qualification: 9/14/2001 Document number: P01000090338
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)  
Spiegel & Utrera PA  
1840 SW 22ND ST, 4th Floor  
MIAMI, FL 33145

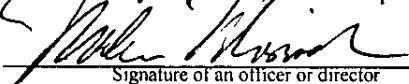
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Matthew D. McKissack  
4769 The Grove Drive, Ste 100  
Windermere, FL 34786

P.O. Box NOT acceptable


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.

  
Signature of an officer or director

Matthew D. McKissack, President  
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.

  
Signature of Registered Agent

4 Oct 12  
Date

If signing on behalf of an entity:

Matthew D. McKissack  
Typed or Printed Name

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