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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Ronald T. Romeo, P.A.  (Name of corporation)
DOCUMENT NUMBER: PO(000)17839
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:
Fonald T. Romeo (Name of person)
Rovald T. Romeo, P.A.  (Name of firm/company)
P.O. BOX 23605 (Address)
Jacksonville 172 32241-3605 (City/state and zip code)
For further information concerning this matter, please call:
Royald T. Romeo at (904) 739-3066  (Name of person) at (404) 739-3066  (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## 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  ———————————————————————————————————
of Florida.
1. The name of the corporation: Royald T. Royneo, P.A.
2. The principal office address: 5050 Steps Avenue
Macksonville, FL 32216
3. The mailing address (if different): P.O. Box 23605
Macksonville FC 32241-3605 30 0
4. Date of incorporation/qualification: 12/12/01 Document number: Polosis/2839
5. The name and street address of the current registered agent and registered office on file wiff the P Florida Department of State:
Tronald T-Romed For
2209 Park Place
Ponte Vedra Beach FL 32082
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    Tonald T. Rowld
5050 Stepp Avenue
(P.O. Box for personal mailbox NOT acceptable)
Jacksonville, FL 32241-3605
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, chairman or vice chairman of the board)  Rouald T. Rounev  (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 hus been notified in writing of this change.
(Signature of Registered Agent)  (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
(Typed or Printed Name) (Capacity)

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