-P02000010397

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Constitution Constitution of Charles
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
_

Office Use Only



500057266045

07/15/05--01016--005 **105.00

FILED

05 JUL 15 PHI2: 52

GA PA

COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Berman & Norton Breman, A Professional Association						
(Name of corporation)						
P02000010397 DOCUMENT NUMBER:						
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:						
Steven M. Berman, Esq.						
(Name of contact person)						
Berman & Norton Breman, A Professional Association						
(Firm/Company)						
401 S. Florida Avenue, Suite 300						
(Address)						
Tampa, FL 33602						
(City/state and zip code)						
For further information concerning this matter, please call:						
Sydney Bell at (813) 301 0043 (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 Ploys Gaines Street Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is	submitted for a c	orporation organ	12, 607.1508, or 617.1508, nized under the laws of the ered agent, or both, in the	State of FLOR		-
1. The name of the cor	poration: Berm	an & Norton	Breman, A Profess	sional Assoc	iation	
2. The principal office	address:	401 S. Flor	rida Ave., Suite 3	300		
·		Tampa, FL	33602			
3. The mailing address	(if different):					
4. Date of incorporation	n/qualification; _	1/29/2002	Document number:	P0200001039		
5. The name and street Florida Department		rrent registered a	gent and registered office	on file with the		
Cathe	erine M. Norton B	Breman, Esq.				
401 S	. Florida Ave., St	uite 300		Āċ	0	
Tamp	oa, FL 33602				05 JUL 15	
(if changed):	address of the ne		nt (if changed) and /or regi	ASSET OF THE PROPERTY OF THE P	. 15 PH 12:	
	. Florida Avenue		<u> </u>		2:52	•
	(P.O	. Box NOT acceptable)		→		
Tamp	a, FL 33602					
The street address of i as changed will be ide	ts registered officing	ce and the street	address of the business o	office of its registe	ered agent	t,
Such change was auth authorized by the boar	orized by resoluted, or the corpora	tion duly adopted ation has been no	I by its board of directors tified in writing of the cl	s or by an officer nange.	so	
(Suprature of an	officer or director)		Steven M. Berman	RES.		
I hereby accept the ap I further agree to com of my duties, and I am document is being file corparation has been	pointment as reg ply with the prov familiar with an a merely to reflec notified in writin	ristered agent an visions of all stati d accept the obli ct a change in th g of this change.	d agree to act in this cap utes relative to the prope igation of my position as e registered office addres		erformand Or, if the m that th	ce is e
VC _	f Registered Agent)	·	(Da	ic)		
If signing on behalf of STEVEN M.	an entity: BERMan Printed Name)		-			

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