## P02000010455

| (Requestor's Name)                      |  |  |
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| (Address)                               |  |  |
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| (Address)                               |  |  |
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| (City/State/Zip/Phone #)                |  |  |
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| PICK-UP WAIT MAIL                       |  |  |
| •                                       |  |  |
| (Business Entity Name)                  |  |  |
| •                                       |  |  |
| (Document Number)                       |  |  |
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| Certified Copies Certificates of Status |  |  |
| هم به                                   |  |  |
| Consideration to Film Off               |  |  |
| Special Instructions to Filing Officer: |  |  |
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## **COVER LETTER**

| TO: Amendment Section Division of Corporations |   |
|--|---|
|  |   |
| SUBJECT:                                       | David Howard, P.A.  |
|  | (Name of Corporation)                                       |
| DOCUMENT NUMBER:                               | P02000010455  |
| The enclosed Statement of Change of Reg        | gistered Office/Agent and fee are submitted for filing.     |
| Please return all correspondence concerni      | ing this matter to the following:                           |
| •  |   |
|  | David A Howard  |
|  | (Name of Contact Person)                                    |
|  |   |
| · г  | David A Howard P.A.   |
|  | David A Howard P.A. (Firm/Company)                          |
|  |   |
| 108  | 300 Biscayne Boulevard, Suite 560                           |
|  | (Address)   |
|  |   |
| N  | Miami, FL 33161-7810<br>(City/State and Zip Code)           |
|  | (City/State and Zip Code)                                   |
| For further information concerning this m      | atter, please call:   |
| David A Howard                                 | 205 \ 257.0205  |
| David A Howard (Name of Contact Person)        | at (305) 357-0295<br>(Area Code & Daytime Telephone Number) |
| •  |   |
| Enclosed is a \$35.00 check made payable       | to the Department of State.                                 |
|  |   |
| Mailing Address Amendment Sec                  | Street Address: Amendment Section                           |
| Amendment Sec<br>Division of Cor               |   |
| P.O. Box 6327                                  | Clifton Building  |
| Tallahassee, FL                                |   |

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: David A <sub>4</sub> Howard P.A.   |
| 2. The principal office address: 10800 Biscayne Boulevard, Suite 560, Miami, FL 33161-7810   |
| 3. The mailing address (if different):   |
| 4. Date of incorporation/qualification: 01/30/2002 Document number: P02000010455   |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:   |
| David A Howard   |
| 44 West Flagler St., Ste 675   |
| Miami, FL 33130  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  |
| David A Howard   |
| 10800 Biscayne Blvd., Ste 560  |
| (P.O. Box NOT acceptable) Miami, FL 33161-7810   |
| The street address of its registered office and the street address of the business office of its registered agent, as a hanged 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.  When the support of the change of the |
| 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 two duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument 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 Regulard Ascent)  (Signature of Regulard Ascent)  (Date)   |
| f signing on behalf of an entity:  |

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