

PO2000072667

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
PEER CONSULTANTS FLORIDA, INC.

Certificate of Status	0
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Page Count	023
Estimated Charge	\$35.00

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July 31, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PEER CONSULTANTS FLORIDA, INC.
1460 GULF BLVD STE 1103
CLEARWATER, FL 33767

SUBJECT: PEER CONSULTANTS FLORIDA, INC.
REF: P02000072667

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Darlene Connell
Regulatory Specialist III

FAX Aud. #: H14000180360
Letter Number: 514A00016437

RECEIVED
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
1460 GULF BLVD
CLEARWATER, FLORIDA

RE-SUBMIT

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date of submission 7/30

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: PEER Consultants Florida, Inc.
2. The principal office address: 1460 GULF BLVD STE 1103 CLEARWATER, FL 33767

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/2/2002 Document number: P02000072667

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)

ABRON, LILIA A
1460 GULF BLVD. SUITE 1113 CLEARWATER, FL 33767

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

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CORPORATION DIVISION
TALLAHASSEE, FLORIDA

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.

Diana L. Tucker
Signature of an officer or director

Diana L. Tucker, COO/CFO
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.

By: *Janet Vincent*
Signature of Registered Agent

7/28/14
Date

If signing on behalf of an entity:

Janifer Vincent
Vice President - Assistant Secretary

*** 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 (03/12)