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O SIMMONS MAY 0 6 2020

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

statement of ch	e provisions of sections 607.0502, 617.050 hange is submitted for a corporation organ der to change its registered office or regist	ized under the laws of the State of Fl	orida
1. The name of	f the corporation: Deborah B. Talenfeld, P.A.	<u>. </u>	
2. The principa	al office address: 8558 Via Giardino, Boca R	aton, Florida 33433	
3. The mailing	address (if different):		
4. Date of inco	orporation/qualification: January 29, 2003	Document number: P03000011	039
5. The name at	nd street address of the current registered a artment of State: (If resigned, enter resigns	gent and registered office on file wit	h the
	BSPA Corporate Services, Inc.		~ 3
	350 E. Las Olas Blvd., Suite 1000		020 F
	Fort Lauderdale, Florida 33301		1020 HAY -5
6. The name as (if changed)	nd street address of the new registered age	nt (if changed) and /or registered offic	
	Deborah B. Talenfeld		~ ~ ~
	8558 Via Giardino		- 0
	P.O. Bo	t NOT acceptable	
	Boca Raton, Florida 33433		
The street add as changed wi	tress of its registered office and the street ill be identical.	address of the business office of its	registered agent,
Such change vauthorized by	was authorized by resolution duly adopted the board, or the corporation has been no	l by its board of directors or by an outfied in writing of the change.	officer so
OJAAR		Deborah B. Talenfeld	
Signa	ture of an officer or director	Printed or typed name and title	
I hereby accept further agree of my duties, a document is b corporation h	ot the appointment as registered agent an e to comply with the provisions of all stat and I am familiar with and accept the obl eing filed merely to reflect a change in th as been notified in writing of this change	d agree to act in this capacity, utes relative to the proper and comp igation of my position as registered e registered office address, I hereby	plete performance agent. Or, if this confirm that the
OJAAR		May 5, 2020	
S	ignature of Registered Agent	Date	
If signing on b	behalf of an entity:		
	Typed or Printed Name		
	* * * FILING FI	EE: \$35.00 * * *	