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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Daniel Devine & Company

Name of Corporation

DOCUMENT NUMBER: PU

P04000051879

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:

Daniel Devine

Name of Contact Person

Daniel Devine & Company

Firm/Company

7220 W Cypresshead Drive

Address

Parkland, FL 33067

City/State and Zip Code

Daniel@ddevine.co

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Devine

,954

592 9869

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of chang	ovisions of sections 607.0502, 617.0502 e is submitted for a corporation organiz o change its registered office or register	zed under the laws of the State of Floric	da
1. The name of the	corporation: Daniel Devine & C	ompany	
2. The principal of Parkland, F	_{fice address:} 7220 W Cypresshe FL 33067	ead Drive	
	ress (if different):		
4. Date of incorpor	ration/qualification: 03/23/2004	Document number: P040000	51879
	reet address of the current registered ag ent of State: (If resigned, enter resigned		n e
L	amont & Neiman, P.A.		
N	ew World Tower Suite 801, 101	N. Biscayne BLVD	
N	liami, FL 33132		5 00.3
6. The name and st (if changed):	reet address of the new registered agent	t (if changed) and /or registered office	
<u>D</u>	aniel Devine		
7	7220 W Cypresshead Drive		
<u>P</u>	P.O. Box NOT a	icceptable	
The street address as changed will be	of its registered office and the street a identical.	ddress of the business office of its reg	istered agent,
Such change was a authorized by the l	authorized by resolution duly adopted board, or the corporation has been noti	by its board of directors or by an offic fied in writing of the change.	er so
Himberlyte Signature of	Kimberly Pierce, Secretary Signyfure of an officer or director Kimberly Pierce, Secretary Printed or typed name and title		ŗ
I further agree to o performance of my agent. Or, if this o	c appointment as registered agent and comply with the provisions of all status duties, and I am familiar with and ac document is being filed merely to refle at the corporation has been notified in	tes relative to the proper and complete cept the obligation of my position as r ct a change in the registered office ad	registered
Daniel	50	May 1,2018	
-	ne of Registered Agent	Date	
If signing on behale Daniel Devin	-		
	d or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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