P04.000148548

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: M. Scott Leonard, P.A. (Name of corporation)
DOCUMENT NUMBER: P04000148548
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:
M. Scott Leonard (Name of contact person)
M. Scott Leonard, P.A. (Firm/Company)
355 Alhambra Circle, Suite 1250 (Address)
Coral Gables, Florida 33134
(City/state and zip code)
For further information concerning this matter, please call:
M. Scott Leonard at (305) 444-6669 ext. 191 (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 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(6/04)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida nange is submitted for a corporation organized under the laws of the State of ler to change its registered office or registered agent, or both, in the State of I	Florida	this	
		rioriaa.		
1. The name of	f the corporation; M. Scott Leonard, P.A.			-,
The principa	d office address: 355 Alhambra Circle, Suite 1250, Coral Gables, Florida 3	3134		
3. The mailing	address (if different): same	z - 1871 - 1988		
4 Date of incor	rporation/qualification: 10/24/2004 Document number: P04000	148548		
	-			
	nd street address of the current registered agent and registered office on file wartment of State:	im me		
•	M. Scott Leonard, P.A.(Office) M. Scott Leonard (Agent)	<u></u>		-
	150 W. Flagler Street, Suite 2850	_ F.	0	
	Miami, Florida 33130	_ 	S JUI	-11
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered of	Fice SEE.	. 18 P	
	M. Scott Leonard	- FLO	PM 12: 4:	
	355 Alhambra Circle, Suite 1250	RED RED	84	
	(P.O. Box NOT acceptable)	- >		
	Coral Gables, Florida 33134			
The street addr	ress of its registered office and the street address of the business office of ill be identical.	ts registe	red age	ent,
Such change wanthorized by t	vas authorized by resolution duly adopted by its board of directors or by ar the board, or the corporation has been notified in writing of the change.	ı officer s	Ю	
	$m \leq d \leq d$	0.1	- 55	
(Signal	ture of an officer or director) M. Scotl Leonar D (Printed or typed name and	title)	- = 0	
I hereby accept I further agree of my duties, a document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and coind I am familiar with and accept the obligation of my position as registere thing filed merely to reflect a change in the registered office address, I here as been notified in writing of this change.	nplete pe d agent. by confir	rforma Or, if m that	ince this the
	2/12/20			
(S	ignature of Registered Agent) (Date)			_
If signing on be	ehalf of an entity:			
155				
((Typed or Printed Name)			

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