P04000167024

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OF DEC -4 AHII: 05

T. Robert DEC 0 & 2005

COVER LETTER

TO: Amend Division	dment Section on of Corporations	
SUBJECT:	DIONE ADAIR COLLIER-LARKIN	orporation)
DOCUMENT	NUMBER: P04000167024	
The enclosed S	Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return a	Il correspondence concerning this matter	to the following:
	Damon A. Chase, Esquire (Name of Cor	ntact Person)
	Chase Freeman, P.A. (Firm/Co	mpany)
	250 International Parkway,	Suite 250
	Lake Mary, Florida (City/State an	32746
For further info	ormation concerning this matter, please c	all:
Damon A. C	Chase, Esquire (Name of Contact Person)	at (407) 333-7337 (Area Code & Daytime Telephone Number)
Enclosed is a \$	35.00 check made payable to the Depart	ment 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 ch	ange is submitted fo	or a corporation org	502, 607.1508, or 617.15 anized under the laws of istered agent, or both, in	the State of Florida	
1. The name of	the corporation:	DIONE ADAIR	COLLIER-LARKIN, P	.A.	
2. The principa	l office address: 20	4 Temple Avenue	e		
	Fe	rn Park, FL 327	730		
3. The mailing	address (if different):			
4. Date of incom	rporation/qualificati	on: December 13	, 2004 Document numb	er: P0400016702	24
	d street address of t artment of State:	he current registered	agent and registered off	ice on file with the	06 DEC -4
	Chase Law (Offices, P.A.	W. W. L.		題の
	301 W. SR	434, Suite 30	9		SSET
	Winter Sprin	gs, FL 32708			SEE. FLORIE
6. The name an (if changed):		he new registered ag	gent (if changed) and /or i	registered office	ORIDA ORIDA
	Damon A. C	chase, Esquir	e		
	250 Internat	ional Parkwa			
	Lako Mary I	(P.O. Box NOT acceptate	ble)	22746	
	Lake Mary, I			<u>3274</u> 6	
The street addr as changed wil	ess of its registered l be identical.	l office and the stre	et address of the busines	ss office of its regist	ered agent,
Such change wanthorized by t	as authorized by re the board or the	solution duly adop rporation has been	ted by its board of direc notified in writing of the	tors or by an officer change.	so
(Signal	ture of an office or director	or)	Dione C Printed or	Ollier-Las	Yein
I hereby accept I further agree of my duties, at document is be	t the appointment a to comply with the nd I am familiar wi ing filed merely to		and agree to act in this a atutes relative to the pro- bligation of my position the registered office add ge.	capacity oper and complete p as registered agent dress, I hereby confi	performance . Or, if this rm that the
S	ignature of Registered Age	ent)		06 (Dafe)	
	ehalf of an entity:				
	Chase, Esquire Typed 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 * * *