P05000034169

(Re	equestor's Name)				
(Ad	ldress)				
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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SECRETARY OF STATE DIVISION OF CORPORATIONS

RA Chg.

78, 6/6

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations	•			
SUBJ	BJECT: Judy C. Johnson, PA				
	(Name of corporation	1)			
DOC	CUMENT NUMBER: P05000034169				
The e	enclosed Statement of Change of Registered Office/Agent and fe	ee are submitted for filing.			
Please	se return all correspondence concerning this matter to the follow	ing:			
	Judy C. Johnson				
	(Name of person)				
	Judy C. Johnson, PA (Name of firm/company				
	(Name of Tirm/company	y)			
	5100 Burchette Road, Unit 150°	1			
_	(Address)	I			
	Tampa, FL 33647				
	(City/state and zip code)				
For fu	further information concerning this matter, please call:				
	Judy C. Johnson at ((813) 558-8339 (Area code & daytime telephone number)			
	(Name of person)	(Area code & daytime telephone number)			
Enclo	losed is a \$35.00 check made payable to the Department of State.	7			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399			
	rananasce, FL J2J14	rananassee, I'L J2J77			

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

Pursuant to the	provisions of sections 607.0502 , 617.0502 , 60)7.1508, or 617.1508, Florida Statutes, t	his statement of
_	tted for a corporation organized under the la		in order
to change its re	gistered office or registered agent, or both, in	the State of Florida.	
1. The name of	the corporation: Judy C. Johnson, PA		
2. The principal	office address: 5100 Burchette Road, Unit 1	501, Tampa, FL 33647	
•	ddress (if different):		
4. Date of incor	poration/qualification: 3/7/05	Document number: P05000034169	
	d street address of the current registered agent tment of State:	and registered office on file with the	
	Daniel S. Friebis		_
	3890 Turtle Creek Dr., S	uite B.	_
	Port Orange, FL 32127		-
6. The name an (if changed):	d street address of the new registered agent (if	changed) and /or registered office	
	Judy C. Johnson		<u>.</u>
	5100 Burchette Road,		_
	(P.O. Box or personal mailbo	ix NOT acceptable)	_
	Tampa, FL 33647		-
The street addr changed will b	ess of its registered office and the street add identical.	ress of the business office of its registe	red agent, as
Such change w the board, or the	as authorized by resolution duly adopted by e corporation has been notified in writing of	its board of directors or by an officer s the change.	so authorized by
- July	y Colin	Judy C. Johnson	ile
I hereby accep I further agree duties, and I an being filed men been notified in	the appointment as registered agent and as lo comply with the provisions of all statutes a familiar with and accept the obligation of ely to reflect a change in the registered office writing of this change.	,	,
James	(Signature of Roustered Agent)	(Date)	
If signing on b	chalf of an entity:		
	Judy C. Johnson		
	(Typed or Printed Name)	(Capacity)	

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