

P05000038480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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RA & RO change

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A. RAMSEY

MAR 02 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2022

LINDA LAIRD
2570 PALO DURO BOULEVARD
NORTH FORT MYERS, FL 33917 US

SUBJECT: LINDA ATKINSON, P.A.
Ref. Number: P05000038480

We have received your document for LINDA ATKINSON, P.A. and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 622A00003736

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LINDA LAIRD, PA
Name of Corporation

DOCUMENT NUMBER: POS000038420

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:

LINDA LAIRD
Name of Contact Person

Firm/Company

2570 PALO DURO BLVD
Address

NORTH FORT MYERS, FL 33917
City/State and Zip Code

LINDA.LAIRD@OUTLOOK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LINDA LAIRD at (941) 661-4294
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a ⑤ 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LINDA ATKINSON, PA
2. The principal office address: 3223 S. CLAMBERY BLVD
NORTH PORT, FL 34286
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7-4-05 Document number: PO5000038480
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

John C. Heekin
21202 Olean Blvd, Suite C-2
Port Charlotte, FL 33952

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LINDA LAIRD
2520 PALM BEACH BLVD
NORTH FORT MYERS, FL 33917

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Linda Laird
Signature of an officer or director

LINDA LAIRD, PRESIDENT
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Linda Laird
Signature of Registered Agent

2-20-22
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)