

POS000156802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

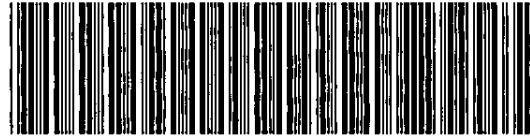
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600256906806

02/24/14--01037--001 \*\*35.00

FILED  
14 FEB 24 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 25 2014

C. CARROTHERS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Victor Smith Law Group, P.A.

Name of Corporation

**DOCUMENT NUMBER:** P05000156802

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:

Victor R. Smith

Name of Contact Person

The Victor Smith Law Group, P.A.

Firm/Company

799 Overlook Drive

Address

Winter Haven, FL 33884

City/State and Zip Code

victor.smithlaw@gmail.com

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

For further information concerning this matter, please call:

Cindy Curry

Name of Contact Person

at ( 863 ) 268-8285

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**

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: The Victor Smith Law Group, P.A.  
2. The principal office address: 799 Overlook Drive, Winter Haven, FL 33884

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 11/29/2005 Document number: P05000156802

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)

Victor R. Smith

395 South Central Avenue

Bartow, FL 33830

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

Victor R. Smith

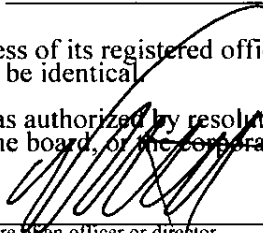
799 Overlook Drive

P.O. Box NOT acceptable

Winter Haven, FL 33884

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.

  
\_\_\_\_\_  
Signature of an officer or director

Victor R. Smith, Director

\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Signature of Registered Agent

February 18, 2014

\_\_\_\_\_  
Date

If signing on behalf of an entity:

Victor R. Smith

\_\_\_\_\_  
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 (03/12)

**FILED**  
14 FEB 24 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA