P05000160755

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COVER LETTER

TO: Amindment Section Division of Corporations
SUBJECT: TERRENCE O'SVIIVAN, P.A. (Name of Corporation)
DOCUMENT NUMBER: P05000 160755
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:
Terrence O'Sullivan (Name of Contact Person)
(Name of Contact Person)
Law OFFices OF Turrence O'Sullivan (Firm/Company)
(Filli/Company)
one he are ave sure 200 (Address)
Mlami PL 33132
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 358 5658 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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.
1. The name of the corporation: Teatena O'Sullivan, P.A.
2. The principal office address: One ne suono ave suite 200
miami FL 33132
3. The mailing address (if different):
4. Date of incorporation/qualification: 137 05 Document number: \(\omega 5000160755 \)
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Timena O'Sullivan one ne 200 ave svite 200
One he are ave suite 200
Mismi PL 33132
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
James O'Sullivan
6917 Collins Ave # 1606
Miami Beach, FL 33141
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 office or director) TERRENCE O'SULIVAY (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) (Date)
If signing on behalf of an entity:
(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 * * *