

P06000000 2642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

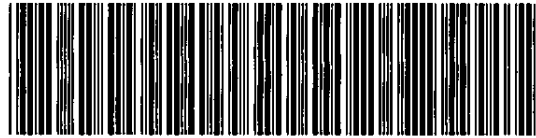
(Business Entity Name)

(Document Number)

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FILED  
2007 AUG -6 PM 5:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AR  
8/10/07

LAW OFFICE OF  
**VICKI L. SHORT, P.A.**  
7717 PINE LAKES BLVD. • PORT ST. LUCIE, FLORIDA 34952 •  
PH: (954) 548-7154 • vicki.short@gmail.com

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August 3, 2007

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Change of Principal and Mailing Address

Dear Sir/Madame:

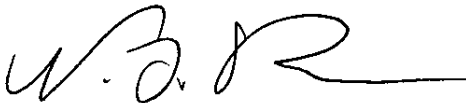
Enclosed, please find a Statement of Change of Registered Agent and a check for the \$35.00 filing fee. In addition to this change, I am also requesting that the Principal and Mailing Addresses for the Law Office of Vicki L. Short, P.A. (former address: 207 Orange Ave., Suite C, Ft. Pierce, FL 34950) be changed to the following:

7717 Pine Lakes Blvd  
Port St. Lucie, FL 34952

Also, please change my address as president to the above new address.

Thank you for your kind attention. Should this letter not be sufficient to make these changes, please contact me at the above telephone number or new address.

Sincerely,



Vicki L. Short  
President

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Law Office of Vicki L. Short, P.A.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000002642

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:

Vicki L. Short  
(Name of Contact Person)

Law Office of Vicki L. Short, P.A.  
(Firm/Company)

7717 Pine Lakes Blvd.  
(Address)

Port St. Lucie, FL 34952  
(City/State and Zip Code)

For further information concerning this matter, please call:

Vicki L. Short at ( 954 ) 548-7154  
(Name of Contact Person) (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: Law Office of Vicki L. Short, P.A.
2. The principal office address: 207 Orange Ave., Suite C, Ft. Pierce, FL 34950
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/06/2006 Document number: P06000002642
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Vicki L. Short

207 Orange Ave., Suite C

Ft. Pierce, FL 34950

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

Vicki L. Short


7717 Pine Lakes Blvd.

(P.O. Box NOT acceptable)

Port St. Lucie, FL 34952

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

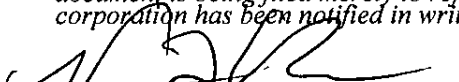
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Vicki L. Short, 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.*

  
(Signature of Registered Agent)

8/3/07  
(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 (8/05)

**FILED**  
2007 AUG -6 PM 5:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA