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SECRETARY OF STATE
TABLAHASSEE, FLORIDA

Amendment Section

TO:

COVER LETTER

Division of Corporations SUBJECT: Alexandra Barone and Linda A Tatum Inc (Name of Corporation) DOCUMENT NUMBER: P06000048913 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: Alexandra Barone or Linda Tatum (Name of Contact Person) Alexandra Barone and Linda A Tatum Inc (Firm/Company) 6901 SW 18th St suite 203E (Address) Boca Raton, Florida 33433 (City/State and Zip Code) For further information concerning this matter, please call: Alexandra Barone or Linda Tatum at (561 367-1911 (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

J

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi er to change its registered office or register	zed under the laws of the State of $_$	<u> </u>
1. The name of	the corporation: Alexandra Barone and	d Linda A Tatum,Inc -	
2. The principal	office address: 6901 SW 18th St Suite	e 203E Boca Raton Florida 33	3433
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 4500	Document number: P06000	048913
	d street address of the current registered ag rtment of State:	ent and registered office on file with	h the
	Alexandra Barone		
	20166 Palm Island Dr		
	Boca Raton, Florida 33433		
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered offi	FII S SEP - CORETAN
	Alexandra Barone		- H
	6901 SW 18th St Suite 203	E	PH 8: FEOR
	(P.O. Box NOT acceptable) Boca Raton Florida 33433		24 10A
-	ess of its registered office and the street a be identical.		
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an ified in writing of the change.	officer so
(Signati	ure of an officer or director)	Alexandra Barone and Linc	
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statud I am familiar with and accept the obliging filed merely to reflect a change in the seen notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and com gation of my position as registered registered office address, I hereb	plete performance l agent. Or, if this y confirm that the
(Derd	<u></u>	09/01/2006	
	gnature of Registered Agent) Phalf of an entity:	(Date)	
(7	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 * * *