P06000074435

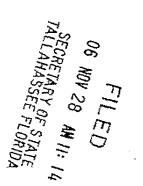
(Re	equestor's Name)	
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(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
	·
SUBJECT: LORENE SEELER YOUNG, P.A. (Name of Corpora	
(Name of Corpora	ition)
DOCUMENT NUMBER: P06000074425	<u> </u>
The enclosed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
LORENE SEELER YOUNG (Name of Contact F	Person)
(rune or conduct	olon,
LORENE SEELER YOUNG, P.A	٩.
(Firm/Compan	
15751 Sheridan Street #206 (Address)	
(Audress)	
Davie, FL 33331	
(City/State and Zip	Code)
For further information concerning this matter, please call:	
Lorene Seeler Young at (954) 252-9938
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department	of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
r to state to the state of the	Tallahassee, FL 32301

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

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	ne corporation: LORENE SEELER YOUNG, P.A.
	office address: 15751 Sheridan Street #206, Davie, FL 33331
3. The mailing ac	Idress (if different): 15751 Sheridan Street #206, Davie, FL 33331
4. Date of incorp	oration/qualification: 5/30/06 Document number: P06000074425
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:
	Lorene Seeler Young
	6067 Hollywood Boulevard #307
	Hollywood, FL 33024
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address of the new registered agent (if changed) and /or registered office of the street address
	15751 Sheridan Street #206
	Davie, FL 33331
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
·, -	Lorene Seeler Young, President (Printed or typed name and title)
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. On comply with the provisions of all statutes relative to the proper and complete performance of all am familiar with and accept the obligation of my position as registered agent. Or, if this is a significant of the proper and the property to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Forene SI	uler jung 11/21/06
If signing on bel	mainte of Register of Ments
Lorene Seel	
	yped or Printed Name)

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