P06000132301

questor's Name)	
dress)	
dress)	
y/State/Zip/Phone	e #)
WAIT	MAIL
siness Entity Nar	ne)
(Document Number)	
_ Certificates	s of Status
Special Instructions to Filing Officer:	
	dress) dress) //State/Zip/Phone WAIT siness Entity Nar cument Number) Certificates

Office Use Only



100277771341

10/08/15--01012--007 **35.00

15 OCT -8 PM 1:07

FOLCASION NOT STATE

OCT 9 2015

C LEWIS

COVER LETTER"

TO: Amendment Section Division of Corporations
SUBJECT: LAURA J. LARSON PA Name of Corporation
DOCUMENT NUMBER: PO6000132301
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:
LAURA J. LARSON, P.A. Firm/Company 4141 Commons Dr. West #4422 Address Destin, FL 32541 City/State and Zip Code LAURALARSON @ LAURAJ CARSON PA. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LAURA J LARSON at (850) 460-7933 Name of Contact Person Area Code & Daytime Telephone Number
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

statement of change is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this a organized under the laws of the State of <u>Florida</u> registered agent, or both, in the State of Florida.
1. The name of the corporation: LAURA	J LARSON PA
2. The principal office address: 4141 Cor	nmons Dr. West #4422
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10 23	2006 Document number: P06000132301
5. The name and street address of the current regis Florida Department of State: (If resigned, enter the current regis and street address of the current regis address of the current regis and street address of the current regis address of the cu	
LARSON, L	AURA J
•	RD, 346
	JN65, J=L 33067 B
6. The name and street address of the new register (if changed):	gi ^{rel} ty
LARSON, LA	TANY
4141 Commor	ns Dr. West #4422 = ===============================
DESTIN, FL	32541
The street address of its registered office and the as changed will be identical.	street address of the business office of its registered agent,
Such change was authorized by resolution duly a authorized by the board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.
Lawry Lerso Signature of an officer or director	LAURA J. LARSON PRESIDENT
I hereby accept the appointment as registered ag I further agree to comply with the provisions of a performance of my duties, and I am familiar with agent. Or, if this document is being filed merely hereby confirm that the corporation has been not	ent and agree to act in this capacity. Ill statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I tified in writing of this change.
Laurgherson	10/1/15
Signature of Registered Agent	/ / Date
If signing on behalf of an entity:	
LAURA J LARSON	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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