## P060001405P1

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



200087167792

02/05/07--01022--013 \*\*35.00

Ro Chy.

)7 FEB -5 PHIC: O

T. Roberts FEB 0 6 2007

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: William Pace PA (Name of Corporation)
DOCUMENT NUMBER: PO 600014 0581
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:
William Pece (Name of Contact Person)
William Pace DA (Firm/Company)
1900 NE 8th Ct. #203 (Address)
Ft. Lauderdale, FL 33704 (City/State and Zip Code)
For further information concerning this matter, please call:
Wi Wiaw Pace at (954) 401-1338  (Name of Contact Person) at (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 organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: William Pace PA
2. The principal office address: 1900 NE 8th Ct. #203
Ft. Lauderdele, FL 33304
3. The mailing address (if different): 5ame
11/7/06 schanged to William Pace PA Frontican
4. Date of incorporation/qualification: 1/22/07 Document number: P010000140581 I
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
William Pace
1900 NE 8M CT # 203
Ft, Lauderdahe, FL 33304
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  William Pace  1235 NE 17th Ter.
William Pace
1235 NE 17th Ter.  (P.O. Box NOT acceptable)
Ft. Lauderdule, FL 33304
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.
William Poce (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.
Willem 1/30/07
(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 \* \* \*