

PO600154163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

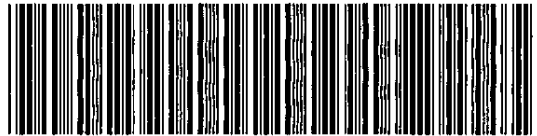
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600156446486

06/03/09--01020--018 **35.00

FILED

2009 JUN -3 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA
Cmy
SL

6-409

Law Offices of
CALVIN J. DOMENICO JR., PA
P.O. Box 19828
Sarasota, FL 34276
PH: (941) 929 1390 Fax: (941) 929 1395

May 29, 2009

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

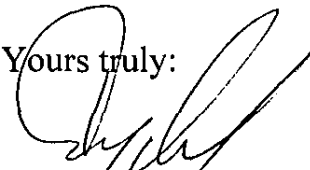
Re: Calvin J. Domenico Jr. PA

Dear Sir or Mdm.:

Enclosed herein is a statement of change of registered office of the registered agent, and a check in the amount of \$35.00. I would request that you file same, and change the address of the registered agent at your earliest convenience.

Should any questions exist kindly do not hesitate to contact me.

Yours truly:



Calvin J. Domenico Jr.
Attorney at Law

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Calvin J Domenico Jr., PA
Name of Corporation

DOCUMENT NUMBER: P06000154163

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:

Calvin J Domenico Jr
Name of Contact Person

Calvin J Domenico Jr
Firm/Company

P O Box 19828
Address

Sarasota, FL 34276
City/State and Zip Code

calvin.domenico@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Calvin J Domenico Jr at (941) 929-1390
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: Calvin J Domenico Jr, PA
2. The principal office address: 2512 Regatta Dr., Sarasota, FL 34231
3. The mailing address (if different): P O Box 19828, Sarasota, FL 34276
4. Date of incorporation/qualification: 12/18/2006 Document number: P06000154163
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Calvin J Domenico Jr,
1990 Main Street, Suite 750
Sarasota, FL 34236

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

Calvin J Domenico Jr.

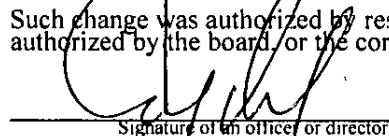
2512 Regatta Dr.

P.O. Box NOT acceptable

Sarasota, FL 34231

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

Calvin J Domenico Jr
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

May 29, 2009
Date

If signing on behalf of an entity:

Calvin J Domenico Jr
Typed or Printed Name

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

FILED
2009 JUN -3 AM 11:32
TALLAHASSEE, FLORIDA
SECRETARY OF STATE