

PO 7000038233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

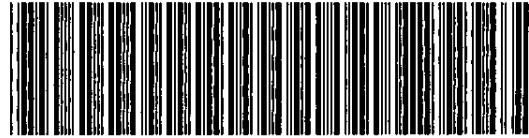
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Stephen Wechsler P.A.
Name of Corporation

DOCUMENT NUMBER: P07000038233

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:

Stephen Wechsler
Name of Contact Person
Stephen Wechsler P.A.
Firm/Company
2221 NE 164th Street #336
Address
North Miami Beach, FL 33160
City/State and Zip Code
Stephen.Wechsler@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen Wechsler at (786) 281-4566
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Stephen Wechsler P.A.
2. The principal office address: 2221 NE 164th Street #336
North Miami Beach, FL 33160
3. The mailing address (if different): same
4. Date of incorporation/qualification: 3/26/2007 Document number: P07000038233
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)

Stephen Wechsler
1814 NE Miami Gardens Drive #805
North Miami Beach FL 33179

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

Stephen Wechsler
2221 NE 164th Street #336
North Miami Beach, FL 33160

P.O. Box NOT acceptable

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.

Steph Wechsler
Signature of an officer or director

Stephen Wechsler
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.

Steph Wechsler
Signature of Registered Agent

2/13/2013
Date

If signing on behalf of an entity:

Stephen Wechsler
Typed or Printed Name

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