

P07000050608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

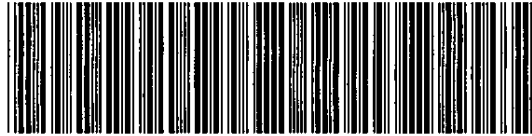
(Business Entity Name)

(Document Number)

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PA Change

2009 OCT 13 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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10-13-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Law Offices of Granda & Associates PA
Name of Corporation

DOCUMENT NUMBER: P07000050608

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:

Stephanie Granda
Name of Contact Person

Granda & Associates PA
Firm/Company

9370 SW 72 Street, Suite A-212
Address

Miami, FL 33173
City/State and Zip Code

Sg2granda law.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Granda at (305) 595-4011
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2009

STEPHANIE GRANDA
GRANDA & ASSOCIATES, PA
9370 S.W. 72ND STREET, SUITE A-212
MIAMI, FL 33173

SUBJECT: LAW OFFICES OF GRANDA & ASSOCIATES, P.A.
Ref. Number: P07000050608

We have received your document for LAW OFFICES OF GRANDA & ASSOCIATES, P.A. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 209A00031844

RECEIVED
OCT 13 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Law offices of Granda & Associates PA
2. The principal office address: 9370 SW 72 St Suite A-212
Miami, FL 33173
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/25/07 Document number: P07000050600

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)

Spiegel & Utrera PA
1840 SW 22nd St., 4th Floor,
Miami, FL 33145

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

Stephanie Granda, Esq.
~~Law offices of Granda & Associates~~
9370 SW 72 St. Suite A-212
Miami, FL 33173

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.

Stephanie Granda
Signature of an officer or director

Stephanie Granda, Owner/President
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.

Stephanie Granda
Signature of Registered Agent

9/23/09
Date

If signing on behalf of an entity:

Stephanie Granda
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED
2009 OCT 13 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA