

P 07 0000 73 117

(Requestor's Name)

(Address)

(Address)

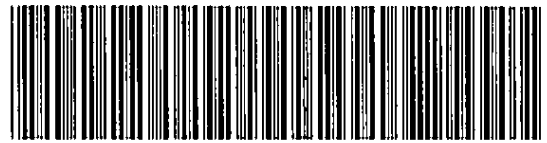
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

Virginia M. Boney, Ph.D. LMFT PA

SUBJECT: The Relationship Center of Jacksonville (fictitious name)
Name of Corporation

DOCUMENT NUMBER: P070000 73117

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:

Virginia M. Boney, Ph.D.
Name of Contact Person

Virginia M. Boney, Ph.D., LMFT P.A.
Firm/Company

8833 Perimeter Park Blvd. #701
Address

Jacksonville, FL 32216
City/State and Zip Code

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

For further information concerning this matter, please call:

Virginia Boney at (904) 236-3963
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: Virginia M. Boney Ph.D. LMFT P.A.

2. The principal office address: 8833 Perimeter Park Blvd. #701
Jacksonville, FL 32216

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7-5-2007 Document number: P07000073117

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)

Virginia Boney
7545 Centurion Pkwy Ste 105
Jacksonville, FL 32256

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

Virginia Boney
8833 Perimeter Park Blvd #701
P.O. Box NOT acceptable
Jacksonville, FL 32216

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TALLAHASSEE, FL

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.

Virginia M. Boney
Signature of an officer or director

Virginia M. Boney, 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.

Virginia M. Boney
Signature of Registered Agent

May 13, 2019
Date

If signing on behalf of an entity:

Typed or Printed Name

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