

P 07000080392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2017 MAY 25 PM 3:15
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TALLAHASSEE, FLORIDA

C. GOLDEN

MAY 30 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Private Health MD, P.A.
Name of Corporation

DOCUMENT NUMBER: PO7 0000803 92

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:

IVAN CASTRO
Name of Contact Person

Private Health MD, PA
Firm/Company

1850 Greenwich Ave
Address

Winter Park FL 32789
City/State and Zip Code

I CASTRO @ CFL.RR.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IVAN CASTRO at (407) 670 9868
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: Private Health MD, P.A.
2. The principal office address: Currently is 1850 Greenwich Ave, Winter Park, FL
In about 5 months will be 300 N. Pennsylvania Ave, Winter Park, FL
3. The mailing address (if different): 1041 Bungalow Avenue, Winter Park, FL 32789
4. Date of incorporation/qualification: 12/10/2007 Document number: PO7000080392
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)

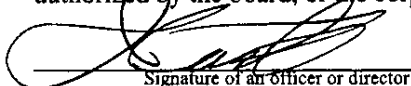
Jennifer Blish
1850 Greenwich Ave
Winter Park FL 32789 Resigned

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

Ivan Castro MD (owner of business)
1850 Greenwich Ave
Winter Park FL 32789

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

Ivan Castro 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.


Signature of Registered Agent

5/8/2017
Date

If signing on behalf of an entity:

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 32304

CR2E045 (03/12)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA