

PO.80000012501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

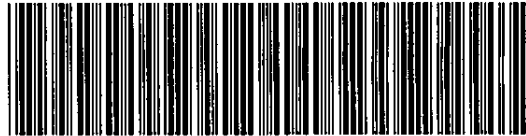
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100271436671

04/20/15--01029--010 **35.00

FILED
15 APR 20 AM 11:30
SEC. OF STATE
TALLAHASSEE, FLORIDA

CRM
4-27-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ANDREW DOUGLAS, P.A.

Name of Corporation

P08000012501

DOCUMENT NUMBER:

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:

ANDREW DOUGLAS

Name of Contact Person

ANDREW DOUGLAS, P.A.

Firm/Company

6824 GRIFFIN ROAD

Address

DAVIE, FLORIDA 33314

City/State and Zip Code

Andrew@Douglasfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Douglas

954

562-0818

Name of Contact Person

at ()

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: ANDREW DOUGLAS, P.A.
2. The principal office address: 6824 GRIFFIN ROAD
DAVIE, FLORIDA 33314
3. The mailing address (if different): SAME AS PRINCIPAL

4. Date of incorporation/qualification: 02/04/2008 Document number: P08000012501

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)

ANDREW DOUGLAS

1776 N PINE ISLAND ROAD, SUITE 104

PLANTATION, FLORIDA 33322

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

ANDREW DOUGLAS

6824 GRIFFIN ROAD

P.O. Box NOT acceptable

DAVIE, FLORIDA 33314

FILED
15 APR 20 AM 11:30
STATE
DIVISION OF CORPORATIONS

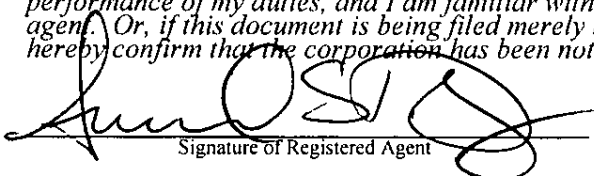
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Andrew Douglas
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

4-16-2015
Date

If signing on behalf of an entity:

Andrew Douglas
Typed or Printed Name

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