

PO8000012723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

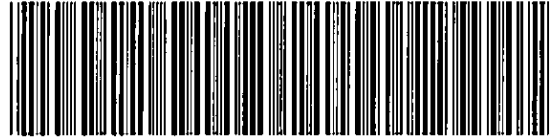
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18 JAN 11 PM 4:42
TALLAHASSEE, FLORIDA

JAN 11 2019
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2017

JORGE L CARBONELL
JORGE L CARBONELL, PA
10720 CARIBBEAN AVENUE STE 540
CUTLER BAY, FL 33189

SUBJECT: JORGE L. CARBONELL, P.A.
Ref. Number: P08000012723

We have received your document for JORGE L. CARBONELL, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 917A00024761

RECEIVED
18 JAN 11 PM 2:13
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Jorge L. Carbone II, PA
Name of Corporation

DOCUMENT NUMBER: PO8000012723

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:

Jorge L. Carbone II
Name of Contact Person

Jorge L. Carbone II, PA
Firm/Company

10720 Caribbean Ave. Suite 540
Address

Cutler Bay FL 33189
City/State and Zip Code

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

For further information concerning this matter, please call:

Belinda Montalvo at (305) 259-8054
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: Jorge L. Carbone II, PA
2. The principal office address: 10720 Caribbean Blvd.
Suite 540, Cutler Bay FL 33189
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 02-04-08 Document number: P08000012723

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)

ACG Registered Agent, LLC
75 Valencia Ave Ste 800
Coral Gables, FL 33134

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

Robert F. Cooke
10720 Caribbean Blvd STE 540
Cutler Bay, FL 33189
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.

[Signature] Signature of an officer or director
Jorge L. Carbone II 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, hereby confirm that the corporation has been notified in writing of this change.

[Signature] Signature of Registered Agent
12/1/2018 Date
FILED
18 JAN 1 PM 4:42
TALLAHASSEE, FLORIDA

If signing on behalf of an entity:

Jorge L. Carbone II
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