## P08 0000025583

(Re	equestor's Name)				
(Address)					
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
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SECRETARY OF STATE

JU 09/30/20

## **COVER LETTER**

TO:	Amendment Section Division of Corporations		•	
	·			
SUBJI	ECT: EDWARD STEVEN ROGERS PA of Corporation			
Name	of Corporation			
DOCU	JMENT NUMBER: P08000025583			
The en	closed Statement of Change of Registered (	Office/Agent and fee	are submitted for filing	
Please	return all correspondence concerning this n	natter to the following	;·	
Edware	d Rogers			
Name	of Contact Person			
EDWA	ARD STEVEN ROGERS PA			
Firm/C	Company	***		
7191 S	W 99th Circle			
Addre	SS			
Ocala,	Florida 34481			
City/S	tate and Zip Code	<del></del>		
	roned2@bellsouth.net			
E-mai	l address: (to be used for future annual i	report notification)		
For fu	rther information concerning this matter, ple	ease call:		
Edwar	d Rogers  Name of Contact Person	at ( 954	257-0303	
	Name of Contact Person	Area Cod	e & Daytime Telephon	e Number
	1: C25 00 to tour tour bloom the F			

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

Amendment Section
Division of Corporations

The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

**Street Address:** 

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Singe is submitted for a corporation organized under the laws of the State of $\frac{\Gamma}{\Gamma}$ in the State of Flor change its registered office or registered agent, or both, in the State of Fl	lorida		
1. The name of	the corporation: EDWARD STEVEN ROGERS PA			
	office address: 7191 SW 99th Circle, Ocala, FL 34481			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 03/10/2008 Document number: P08000025	5583		
5. The name and	d street address of the current registered agent and registered office on file wit rtment of State: (If resigned, enter resigned)			
	Edward Steven Rogers			
	7191 SW 99th Circle	- 100 100 100 100 100 100 100 100 100 100	2020	
	Ocala. FL 34481	NE 16	<u>1020 AUG -</u>	स्था (स है स्तास र
6. The name and street address of the new registered agent (if changed) and /or registered offi (if changed):			-6 AHII:29	
	Edward Steven Rogers	건절	1: 2:	
	7800 West Oakland Park Blvd. Unit 306	iΠ	9	
	P.O. Box NOT acceptable			
	Sunrise, FL 33351-6741			
The street addr as changed will	ess of its registered office and the street address of the business office of its be identical.	regist	ered a	gent,
	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.			
	re of an Officer or director  Printed or typed fidure and title	ر <u>يمي</u>	<u>Z+.,</u>	<u>ec</u> -,
I hereby accept I further agree of my duties, an document is be	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and com all am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby sheen notified in writing of this change.			
	0/3/2020			
	gnature of Hegistered Agent Date			
If signing on bo	chalf of an entity:			
	yped or Printed Name			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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