

P080000061411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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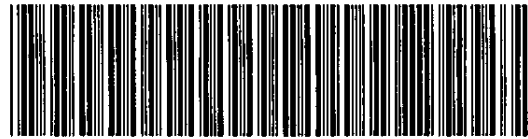
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATION  
13 JUL 22 PM 2:20

JUL 24 2013

T. BROWN

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: The Law Office of Robert H. Ellis, P.A.  
Name of Corporation

DOCUMENT NUMBER: PO8000061411

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:

Robert H. Ellis  
Name of Contact Person

The Law Office of Robert H. Ellis, P.A.  
Firm/Company

121 W. Fourth St. #800  
Address

Jax, FL 32202  
City/State and Zip Code

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

For further information concerning this matter, please call:

Robert Ellis at 904, 342 6009  
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Law Office of Robert H. Ellis, P.A.  
2. The principal office address: 121 West Forsyth St # 800  
Jax, FL 32202  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 6/25/08 Document number: FD8000061411

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)

Robert H. Ellis  
4540 Southside Blvd # 400  
Jax, FL 32216

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

Robert H. Ellis  
121 West Forsyth St. # 800  
Jax, FL 32202  
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

Robert H. Ellis, P., V.P., Sec.  
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]  
Signature of Registered Agent

7-18-13  
Date

If signing on behalf of an entity:

Robert H. Ellis, Esq.  
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

FILED STATE  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATION  
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