

P09000011514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

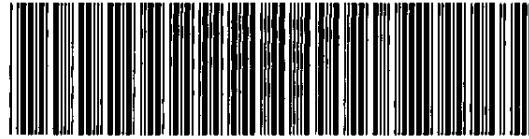
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012/12/27  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LAW OFFICES OF ALETTE H. CAROLAN, P. A.  
Name of Corporation

**DOCUMENT NUMBER:** P09000011514

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:

Alette H. Carolan  
Name of Contact Person

Geller & Carolan, LLC  
Firm/Company

66 West Flagler St, Ste. 200  
Address

MIAMI, FL 33130  
City/State and Zip Code

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

For further information concerning this matter, please call:

Alette H Carolan at ( 305 ) 358-2330  
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: LAW OFFICES OF Alette H. Carolan, PA
- 2. The principal office address: 66 West Flagler Street, Suite 200  
MIAMI, FL 33130
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 02/05/09 Document number: P09000011514

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)

Alette H. Carolan  
66 West Flagler Street, 200  
MIAMI, FL 33130

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

Alette H. Carolan  
66 West Flagler Street, Ste. 200  
MIAMI, FL 33130

P.O. Box NOT acceptable

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FILED

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.

Alette H. Carolan  
Signature of an officer or director

Alette H. Carolan  
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.

Alette H. Carolan  
Signature of Registered Agent

12/9/10  
Date

If signing on behalf of an entity:

Alette H. Carolan  
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