

P09000023020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

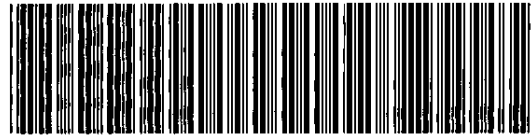
(Document Number)

Certified Copies _____

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Registered
Address Change

10/06/10--01020--001 **35.00

FILED
2010 OCT -6 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AOR
10/8/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT:

Pamela D Horn OTR/C PA
Name of Corporation

DOCUMENT NUMBER:

PS9000023020

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:

Pam Horn

Name of Contact Person

Pamela D Horn OTR/C PA

Firm/Company

1172 Hillsboro Mills

Address

Hillsboro Beach, Fla 33062

City/State and Zip Code

hornpd@bellsouth.net

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

For further information concerning this matter, please call:

Pam Horn

Name of Contact Person

at (954) 421-7119

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

RECEIVED

2010 SEP -1 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 25, 2010

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Document Number P09000023020
Pamela D. Horn, ORT/L, PA

Gentlemen;

Kindly accept this letter as your authorization to change the address for my registered agent to:

Diane L. Barriga
5936 N.W. 79th Way
Parkland, FL 33067

Thank you for your cooperation.

Sincerely,



Pamela D. Horn

**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: Pamela D Horn OTR/L, PA
2. The principal office address: 1172 Hillsboro Mill
Hillsboro Bch, Fla. 33062
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: ~~PO900023020~~ PO900023020

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)

Diane Barriga
980 N. Federal Hwy, Ste 110
Boca Raton, FL 33432


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

Diane Barriga
5936 NW 79th Way
P.O. Box NOT acceptable
Parkland, FL 33067

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SECRETARY OF STATE

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

Pam Horn
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

9/24/2010
Date

If signing on behalf of an entity:

DIANE L. BARRIGA
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