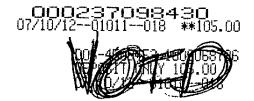
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12 JUL 10 PH 1: 22

RD Change

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T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

STUART I. GROSSMAN, P.A.

Name of Corporation

P09000027151

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:

Stuart Grossman

Name of Contact Person

Levine Kellogg Lehman Schneider + Grossman LLP

Firm/Company

201 S. Biscayne Blvd., 22nd Floor

Miami, FL 33131

City/State and Zip Code

sig@lklsg.com

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

100 100

For further information concerning this matter, please call:

Stuart Grossman

Name of Contact Person

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

CR2E045 (03/12)

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

statement of ch	ange is submitted for a corporation o	.0502, 607.1508, or 617.1508, Florida Statutes rganized under the laws of the State of Florida egistered agent, or both, in the State of Florida.		
1. The name of	the corporation: STUART I. GR	OSSMAN, P.A.		
2. The principa	l office address: 201 S. Biscayn	e Boulevard, 22nd Floor, Miami, F	L 33131	
3. The mailing	address (if different): 201 S. Bisc	ayne Boulevard, 22nd Floor, Miam	ni, FL 33131	
4. Date of incor	rporation/qualification: 03/24/200	9 Document number: P09000027	151	
	nd street address of the current register artment of State: (If resigned, enter res	red agent and registered office on file with the signed)	#	
	Stuart I. Grossman, Esq.		2 2	
	201 S. Biscayne Boulevar	d, 34th Floor	三	
	Miami, FL 33131	* IV •	P P	
6. The name an (if changed):		agent (if changed) and /or registered office	12 JUL 10 PM 1:22 SECRETARY OF STATE	
	Stuart I. Grossman, Esq.			
	201 S. Biscayne Boulevard, 22nd Floor			
	P.O. Box Miami, FL 33131	NOT acceptable		
as changed wil	Il be identical.	reet address of the business office of its registe		
Such change w authorized by t	as authofized by resolution duly ado the board, or the corporation has been	pted by its board of directors or by an officer an notified in writing of the change.	so	
		Stuart I. Grossman, President		
	the appointment as registered agent the appointment as registered agent to comply with the provisions of all f my duties, and I am familiar with a his document is being filed merely to he that the corporation has been notification.	Printed or typed name and title at and agree to act in this capacity. statutes relative to the proper and complete agreet the obligation of my position as reg reflect a change in the registered office addre ted in writing of this change.	istered ess, I	
S	gnature of Registered Agent	Date		
	ehalf of an entity:			
<u> </u>	Typed or Printed Name	V FRE. 625 00 + + +		
	" " " FILING	FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)