

PO910000046521

(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
OCT 03 2017
S. YOUNG

John R. Hargrove

From: CorpAddressChange <corpaddresschange@dos.myflorida.com>
Sent: Wednesday, September 27, 2017 4:21 PM
To: John R. Hargrove
Subject: RE: John R. Hargrove, P.A. -- Address Change

The Registered Agent will require a form and a fee. To make that change, you will need to mail an Amendment to our office. Forms are available on <http://www.sunbiz.org> under "Forms & Fees". Or you can file an Amended 2017 Annual Report.

Corporate Address Change

See attached

From: John R. Hargrove [mailto:JRH@HargroveLawGroup.com]
Sent: Wednesday, September 27, 2017 4:11 PM
To: CorpAddressChange <corpaddresschange@dos.myflorida.com>
Subject: John R. Hargrove, P.A. -- Address Change

Dear Sir or Madame:

Please change all addresses and phone numbers for the noted corporate entity from 433 Plaza Real, Suite 275, Boca Raton, FL 33432, (561) 962-4191, to the following:

*925 South Federal Highway
Suite 715
Boca Raton, FL 33432
Direct Dial: (561) 425-7747
Cell: (561) 376-9750
Email: jrh@hargrovelawgroup.com*

Thank you,

John R. Hargrove

The Department of State is committed to excellence. Please take our Customer Satisfaction Survey .

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: John R. Hargrove, P.A.

Name of Corporation

DOCUMENT NUMBER: P09000046521

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:

John R. Hargrove

Name of Contact Person

John R. Hargrove, P.A.

Firm/Company

925 South Federal Highway, Suite 715

Address

Boca Raton, FL 33432

City/State and Zip Code

jrh@hargrovelawgroup.com

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

For further information concerning this matter, please call:

John R. Hargrove

Name of Contact Person

at (561) 376-9750

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: John R. Hargrove, P.A.

2. The principal office address: 925 South Federal Highway, Suite 715

3. The mailing address (if different): Same

4. Date of incorporation/qualification: February 23, 2017 Document number: P09000046521

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)

433 Plaza Real

Suite 275

Boca Raton, FL 33432

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

925 South Federal Highway

Suite 715

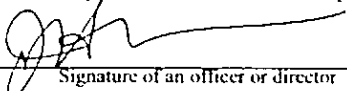
P.O. Box NOT acceptable

Boca Raton, FL 33432

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TALLAHASSEE, FLORIDA

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

President

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

September 28, 2017

Date

If signing on behalf of an entity:

John R. Hargrove, President

Typed or Printed Name

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