

P09000055300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

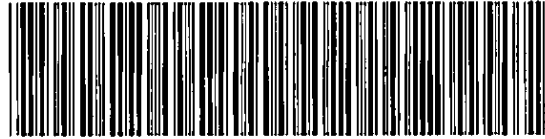
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100390551231

FILED

2022 JUL 22 PM 1:51

SECRETARY OF STATE  
TALLAHASSEE, FL

RECEIVED

2022 JUL 22 PM 2:25

CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

A. BUTLER

JUL 25 2022

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Ilan M. Abramowitz, DMD, PA  
Name of Corporation

**DOCUMENT NUMBER:** P09000055300

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:

Will Peeples

Name of Contact Person

Firm/Company

333 11th Ave South, Suite 520

Address

Nashville, TN 37203

City/State and Zip Code

wpeeples@southernop.com

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

For further information concerning this matter, please call:

Will Peeples

Name of Contact Person

at ( 615 )

925-9270

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Ilan M. Abramowitz, DMD, PA
2. The principal office address: 1054 N. Broadway Ave  
Bartow, FL 33830
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: June 26, 2009 Document number: P09000055300
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)

Abramowitz, Ilan MDR

1054 N. Broadway Ave

Bartow

FL 33830

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

CT Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation

FL 33324

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.

/s/ Ilan M. Abramowitz

Signature of an officer or director

Ilan M. Abramowitz

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.*

CT Corporation System

  
Signature of Registered Agent

7/22/22

Date

If signing on behalf of an entity:

Madonna Cuddihy, Assistant Secretary

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

CR2E045 (04/13)

SECRET  
OFFICE OF STATE  
TALLAHASSEE, FL

2022 JUL 22 PM 1:51

FILED