## P09 0000 \$1043

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		į

Office Use Only



500282232255

02/22/16--01025--006 \*\*35.00

SECRETARY OF STATE

FEB 23 2016 C. CARROTHERS

## \* COVER\*LETTER

TO: Amendment Section 🌁 **Division of Corporations** The Law Office of J. Armando Edmiston, P.A. DBA Ask2Amigo Law Firm Name of Corporation 27-104841 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: Armando Edmiston, Esq. Name of Contact Person Ask2Amigo Law Firm Firm/Company 1560 W Cleveland Street lawinfo@ask2amigo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 813 482-0355
Area Code & Daytime Telephone Number ∘Joana Rabassa 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

## 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.  The Law Office of J. Amoud Edus P.A. DBA  1. The name of the corporation: Ask2Amigo Law Firm	
2. The principal office address: 1560 W Cleveland Street	
Tampa, FL 33606	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 9/30/2009 Document number: P09000081043	
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)	
Armando Edmiston, Esq.	
1560 W Cleveland Street	
Tampa, FL 33606	
6. The name and street address of the new registered agent (it changed) and /or registered office (if changed):    Address changed   P.O. Box NOT acceptable   P.O. Box NOT ac	of some some some some some some some some
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	rez <sup>al</sup>
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.	
Armando Edmiston, 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 2/15/2016  Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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

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