P09000098911

(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



900250667899

08/19/13--01004--005 **35.00



PA Changs
08/22/13

COVER LETTER

TO:

Amendment Section **Division of Corporations**

Deborah Martz Lysaght, P.A.

Name of Corporation

P09000098911

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:

Deborah Martz Lysaght

Name of Contact Person

Deborah Martz Lysaght, P.A.

140 Intracoastal Pointe Drive, Ste 307

Address

Jupiter, Florida 33477

City/State and Zip Code

lysaghtlaw@aol.com

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

For further information concerning this matter, please call:

Deborah Martz Lysaght
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

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S nge is submitted for a corporation organized under the laws of the State of _ r to change its registered office or registered agent, or both, in the State of F		this ———	_
1. The name of t	he corporation: Deborah Martz Lysaght, P.A.			
2. The principal	office address: 140 Intracoastal Pointe Drive, Ste 307 lorida 33477	.		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 3/14/2011Document number: P0900	00989)11	<u> </u>
5. The name and	I street address of the current registered agent and registered office on file wittment of State: (If resigned, enter resigned)	th the		
	Deborah Martz Lysaght			
	1/2 Intracoastal Pointe Drive,			
	Jupiter, Florida 33477	N. C.	ಪ	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	Fig. S.S.	81 3UA	
	Deborah Martz Lysaght	_ 101 11 (20) 12 15		. Tr
	140 Intracoastal Pointe Drive, Ste 307	41.5 VIS	<u>က်</u>	Ö
	P.O. Box NOT acceptable Jupiter, Florida 33477		0	
The street address changed will	ess of its registered office and the street address of the business office of it be identical.	s registe	ered ag	ent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an board, or the corporation has been notified in writing of the change.	officer s	ю	
Signatu	W Martz Lysaght ire of an officer or director Printed or typed name and tit	l ė		
performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and common my duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	i us ree	istered ss, I	!
~	chalf of an entity:			
	Jartz Lysaght yped or Printed Name			

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