

P10000035908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

2015/10/16/11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Coastal Private Wealth Counsel, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P10000035908

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:

Casey N. Smith  
Name of Contact Person

Coastal Private Wealth Counsel, Inc.  
Firm/Company

401 East Las Olas Blvd., Suite 130  
Address

Ft. Lauderdale, FL 33301  
City/State and Zip Code

csmith@coastalprivatewealth.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Casey N. Smith at ( 954 ) 459-0163  
Name of Contact Person 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: Coastal Private Wealth Counsel, Inc.
2. The principal office address: 401 East Las Olas Blvd., Suite 130  
Ft. Lauderdale, FL 33301
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 4/26/10 Document number: P10000035908
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)

Casey N. Smith

566 NE 20th Street, Unit 12

Wilton Manors, FL 33305

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

Casey N. Smith

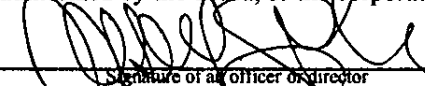
401 East Las Olas Blvd., Suite 130

P.O. Box NOT acceptable

Ft. Lauderdale, FL 33301

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

Casey N. Smith, 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

May 4, 2010

Date

If signing on behalf of an entity:

Casey N. Smith

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 (8/05)

APPROVED  
AND  
FILED  
10 MAY 14 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA