P10000039861

(Requestor's Name)
•
(Address)
• ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Cartifical Coming Cartificators of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700184672937

08/30/10--01011--021 **35.00

10 AUG 30 PM 2: 13

SECRETARY OF STATE

COULLIFTE

AUG 3 0 2010

EXAMINER

COVER LETTER

Division of Corpora	1 ations		
SUBJECT:	Menzer & Hill,		
	Name of Corp	oration	
DOCUMENT NUMBER:	P1000	0039861	
The enclosed Statement of	Change of Registered Office/A	gent and fee are submitted for filing.	
Please return all correspond	ence concerning this matter to	the following:	
	Michael Hill, I	Director	
	Name of Contac	t reison	
Menzer & Hill, P.A.			
Firm/Company			
7777 Glades Road, Suite 100			
	Address	5	
	Boca Raton, F	I 33434	
	City/State and 2	Zip Code	
	info@menzerh	nill.com	
E-mail	address: (to be used for futu	re annual report notification)	
For further information con	cerning this matter, please call	:	
Mich	ael Hill	at (561) 245-4711	
Name of Co	ntact Person	at (561) 245-4711 Area Code & Daytime Telephone Numb	
Enclosed is a \$35.00 check	made payable to the Departme	nt of State.	
<u>Ma</u> Ar	niling Address: nendment Section	Street Address: Amendment Section	
	vision of Corporations	Division of Corporations	
	D. Box 6327 Ilahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

· · · · · · · · · · · · · · · · · · ·	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, ration organized under the laws of the State of Florida	
in order to change its registered off	ice or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Menzer &		
2. The principal office address: 7777 Glad	es Road, Suite 100, Boca Raton, FL 33434	
3. The mailing address (if different):		
4. Date of incorporation/qualification:5	5/10/2010 Document number: P10000	039861
5. The name and street address of the current Florida Department of State: (If resigned, e	registered agent and registered office on file with the enter resigned)	
Michael Hill		
5065 Wiles Road, #30	. _	
Coconut Creek, FL 33	071	O AU
6. The name and street address of the new reg (if changed):	gistered agent (if changed) and /or registered office	10 AUG 30 PM
Michael Hill		STA ORA
7777 Glades Road, So	uite 100	
	P.O. Box NOT acceptable	Ĩ.f.
Boca Raton, FL 33434	1	
The street address of its registered office ar as changed will be identical.	nd the street address of the business office of its registe	ered agent,
Such change was authorized by resolution authorized by the board, or the corporation	duly adopted by its board of directors or by an officer has been notified in writing of the change.	so
Signature of a forticer or director	Michael Hill, Director Printed or typed name and title	
•	red agent and agree to act in this capacity. ns of all statutes relative to the proper and complete p reept the obligation of my position as registered agent change in the registered office address, I hereby confi	performance Or, if this irm that the
Als har	8/23/2010	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Michael Hill 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