

(Requestor's Name)	
(Address)	
· · ·	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
<u> </u>	
(Business Entity Name)	
(Document Number)	
Condition Continue Conditions of C	tata
Certified Copies Certificates of S	ialus
Special Instructions to Filing Officer:	

Office Use Only



900320109299

10/29/18--01013--005 **35.00

S TALLENT NOV 02 2018



RIBURY

COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Law Offices of J. Kevin Carey, P.A. DOCUMENT NUMBER: P10000094623 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: John Kevin Carey Name of Contact Person Law Offices of J. Kevin Carey, P.A Firm/Company 3601 Bayshore Boulevard Tampa, Florida, 33629 City/State and Zip Code jkc@jkcareylaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Kevin Carey

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

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

Hadress of 3601 BAYShore Avenue Stould ballo been 3601 BAYShore Boulevars

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Law Offices of J. Kevin Carey, P.A.
2. The principal	office address: 3601 Bayshore Boulevard, Tampa, FL 33629
	3225
3. The mailing a	ddress (if different). 3224 South MacDill Avenue, Suite 129-219, Tampa Do
	FL,33404
4. Date of incorp	poration/qualification: Nov. 17, 2010 Document number: P10000094623
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	CAREY, JOHN K
	3601 Bayshore Avenue (should have been Blvd.)
	Tampa, FL 33629
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	J. Kevin Carey
	3601 Bayshore Boulevard, Tampa, FL 33629
	P.O. Box NOT acceptable
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change
Signatu	William J. Kevin Bay The side ust
I further agree i performance of agent. Or, if thi	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my dities, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	half of an entity:
T	oped or Printed Name

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