

McChesney  
R. WHITE  
APR 26 2018

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Linda A. Stortz, CPA, P.A.  
Name of Corporation

DOCUMENT NUMBER: P10000101402

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:

Linda A. Stortz, CPA  
Name of Contact Person

Linda A. Stortz, CPA, P.A.  
Firm/Company

801 West Bay Drive, Suite 418  
Address

Largo, FL 33770  
City/State and Zip Code

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

For further information concerning this matter, please call:

Linda A. Stortz, CPA at ( 727 ) 391-7373  
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: Linda A. Stortz, CPA, P.A.
2. The principal office address: 801 West Bay Drive, Suite 418  
Largo, Florida 33770
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/16/2010 Document number: P10000/01402
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)

Linda A. Stortz

10575 68th Ave. No., Suite A-2

Seminole, FL 33772

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

Linda A. Stortz

801 West Bay Drive, Suite 418

P.O. Box NOT acceptable

Largo, Florida 33770

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.

Linda A. Stortz  
Signature of an officer or director

Linda A. Stortz  
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.*

Linda A. Stortz  
Signature of Registered Agent

4/23/18  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

FILED  
18 APR 25 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA