## P110000001550

(Re	equestor's Name)	····		
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	÷ #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



000196831350

03/09/11--01008--026 \*\*35.00

SECRETARY OF STATIONS
OIVISION OF CORPORATIONS
11 MAR -9 PH 1:55

Raichanse Mastroll

## **COVER LETTER**

то:	Amendment Division of	Section Corporations			
SUBJI	ECT:	The Advoc	ates Group La	aw Firm, P.A.	
DOCU	MENT NUM	IBER:	P11000	001550	····
The en	closed Statem	ent of Change of Re	gistered Office/Age	ent and fee are subn	nitted for filing.
Please	return all corr	espondence concern	ing this matter to th	e following:	
			Derek Bre Name of Contact	tt Person	<u> </u>
			· · · · · · · · · · · · · · · · · · ·	. 0.50.1	
	_	The Ad	vocates Group L Firm/Compar		
	_	6881 K	ingspointe Park	way Suite #11	····
			Address		
	-		Orlando, FL 3: City/State and Zip	2819	
			Only/Olate and Est	, 0000	
	<u>-</u>	Der	ek@the brettlaw be used for future		rification)
				uuu. report not	
For fur	ther informati	on concerning this n	natter, please call:		
		Derek Brett	at ·	( 407 )	313-4235
	Name	of Contact Person		Area Code & Day	313-4235 rtime Telephone Number
Enclose	ed is a \$35.00	check made payable	to the Department	of State.	
		Mailing Address Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Street Addres Amendment 9 Division of C Clifton Build 2661 Executi Tallahassee,	Section Corporations ling ive Center Circle

TO:

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

statement of change is submitted for a corporation organized under the laws of the State of Florida  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: The Advocates Group Law Firm, P.A.	
2. The principal office address: 6881 Kingspointe Parkway Suite #11	_
Orlando, FL 32819	
3. The mailing address (if different): 6881 Kingspointe Parkway Suite #11  Orlando, FL 32819	
4. Date of incorporation/qualification: 01/03/2011 Document number: P11000001550	
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)	
Gustavo Abarca	
6881 Kingspointe Parkway Suite #11	名の法
Orlando, FL 32819	
Gustavo Abarca  6881 Kingspointe Parkway Suite #11  Orlando, FL 32819  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Julie Jenkins	OKT
Julie Jenkins	
6881 Kingspointe Parkway Suite #11	
P O. Box NOT acceptable	
Orlando, FL 32819	
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  Derek Brett/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.	
Julie Jenkins February 28, 2011	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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