## 100001683

(Requestor's Name)	
(Address)	1002006448
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	04/11/110101700
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	Creston and the second of the
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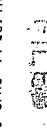
Office Use Only



801

\*\*35.00





## **COVER LETTER**

Division of Corporations				
SUBJECT:	Scott F. Kotler, P.A.  Name of Corporation			
DOCUMENT NUMBER:	P11000007683			
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:				
Scott F. Kotler				
	Name of Contact Person			
	Scott F. Kotler, P.A.			
Firm/Company				
2	255 Alhambra Circle, Suite 630 Address			
	Address			
	Coral Gables, Florida 33134			
	City/State and Zip Code			
	scott@tuckerkotler.com			
E-mail address: (to be used for future annual report notification)				
For further information concerning the	nis matter, please call:			
Scott F. Kotler	at ( 305 ) 804-2436			
Name of Contact Pers	at ( 305 ) 804-2436 On Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made pay	able to the Department of State.			
Mailing Add Amendment Division of P.O. Box 63 Tallahassee	Corporations Division of Corporations Clifton Building			

TO:

Amendment Section

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{F}{F}$ er to change its registered office or registered agent, or both, in the State of Flo	lorida	<u></u>	
1. The name of	the corporation: Scott F. Kotler, P.A.			
2. The principal	office address: 255 Alhambra Circle, Suite 630			
	oles, Florida 33134			
	address (if different): 255 Alhambra Circle, Suite 630 ables, Florida 33134			
		100000	7683	
5. The name and	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the		
	Scott F. Kotler			
	2333 Brickell Avenue, Suite A-1			
	Miami, Florida 33129	Zo	201	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Scott F. Kotler	e LANGE	2011 APR 111	And only the control of the control
	255 Alhambra Circle, Suite 630		PM 12: 0	
	P.O. Box NOT acceptable  Coral Gables, Florida 33134		0	
The street addreas changed will	ess of its registered office and the street address of the business office of its be identical.	registere	d agent,	
	as authorized by resolution duly adopted by its board of directors or by an one board of the corporation has been notified in writing of the change.			
Signatu	Scott F. Kotler re of an officer or director Printed or typed name and title	<del></del>	<del></del>	
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and compad I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.	olete perf agent. C confirm	ormance )r, if this that the	
Sulf	nature of Registered Agent 9/7/11		<del></del>	
_	chalf of an entity:			
	Scott F. Kotler			
Т	vned or Printed Name			

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