

P110000024886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

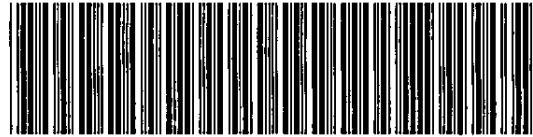
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DREXEL FOX MORGAN, INC.

Name of Corporation

DOCUMENT NUMBER: P11000024886

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:

Alexander Anthony

Name of Contact Person

Firm/Company

P.O Box 52-3498

Address

Miami, FL 33152

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexander Anthony

Name of Contact Person

at (305) 407-7510

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

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Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2012

ALEXANDER ANTHONY
P O BOX 52-3498
MIAMI, FL 33152

SUBJECT: DREXEL FOX MORGAN, INC.
Ref. Number: P11000024886

We have received your document for DREXEL FOX MORGAN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please show only one registered agent name in block #6, the law firm or the individual. The new registered must sign in the space below as registered agent accepting appointment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 412A00028446

RECEIVED
12 DEC 13 AM 10:27
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2012

ALEXANDER ANTHONY
P O BOX 52-3498
MIAMI, FL 33152

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Tina Roberts
Regulatory Specialist II

Letter Number: 412A00028446

**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: DREXEL FOX MORGAN, INC.
2. The principal office address: 7200 CORPORATE CENTER DRIVE SUITE 510
MIAMI, FL 33126
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/11/2011 Document number: P11000024886
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)

ALEXANDER ANTHONY

7200 CORPORATE CENTER DRIVE SUITE 510

MIAMI, FL 33126

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

LAW OFFICE OF STUART J. NUNEZ, P.A

7200 CORPORATE CENTER DRIVE SUITE 510

P.O. Box NOT acceptable

MIAMI, FL 33126

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12 DEC 13 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

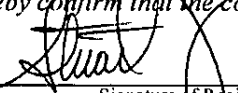


Signature of an officer or director

ALEXANDER ANTHONY, 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.



Signature of Registered Agent

12/10/2012

Date

If signing on behalf of an entity:

Stuart Nunez

Typed or Printed Name

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

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ALEXANDER ANTHONY

7200 CORPORATE CENTER DRIVE SUITE 510

MIAMI, FL 33126

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

LAW OFFICE OF STUART J. NUNEZ, P.A STUART J. NUNEZ, ESQ.

7200 CORPORATE CENTER DRIVE SUITE 510

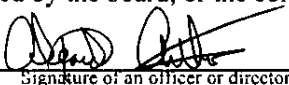
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ALEXANDER ANTHONY, PRESIDENT
Printed or typed name and title

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Signature of Registered Agent

11/21/2012

Date

If signing on behalf of an entity:

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

CR2E045 (03/12)