## P11000011415





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SECHE ARY OF STATE

R.A.

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## COVER LETTER \*\*\*

то:	Amendment Section Division of Corporations		
SUBJ	ECT: J.S. Hemlepp, P.A.  Name of Corporation		
DOC	UMENT NUMBER: P11000071415		
	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
	return all correspondence concerning this matter to the following:		
	Justin S. Hemlepp  Name of Contact Person		
	Name of Contact Person		
J.S. Hemlepp, P.A.			
	Firm/Company		
	10906 Sheldon Road		
	Address		
	Tampa, FL 33626 City/State and Zip Code		
	jhemlepp@hemlepplaw.com  E-mail address: (to be used for future annual report notification)		
For fu	ther information concerning this matter, please call:		
	Justin S. Hemlepp at (813) 438-6103  Name of Contact Person Area Code & Daytime Telephone Number		
	Name of Contact Person Area Code & Daytime Telephone Number		
Enclos	ed is a \$35.00 check made payable to the Department of State.		
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of	Florida
	the corporation: J.S. Hemlepp, P.A.  office address: 10906 Sheldon Road	
Tampa, Fl		
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: August 9, 2011 Document number:	P11000071415
	d street address of the current registered agent and registered office on file w rtment of State: (If resigned, enter resigned)	rith the
	Justin S. Hemlepp	_
	8040 Old County Road 54	
	New Port Richey, FL 34653	7201 FA SI
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	ASS TO
	Justin S. Hemlepp	
	10906 Sheldon Road	- 1: 3
	P.O. Box NOT acceptable  Tampa, FL 33626	<u> </u>
_	ess of its registered office and the street address of the business office of lbe identical.	
authorized by the	as authorized by resolution duly adopted by its board of directors or by a he board, or the corporation has been notified in writing of the change.	n officer so
fis hole	Justin S. Hemlepp,	President
I hereby accept I further agree of my duties, an document is bei corporation has	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 cond I am familiar with and accept the obligation of my position as registering filed merely to reflect a change in the registered office address, I here is been notified in writing of this change.	mplete performance ed agent. Or, if this eby confirm that the
polyte	September 13, 2	2011
	chalf of an entity:	
	ustin S. Hemlepp	
	Syped 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 (8/05)