P11000084536

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
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COVER LETTER

September 1995 Million and St. San

Division of Corporations
SUBJECT: Law Offices of Styshame Name of Corporation
DOCUMENT NUMBER: P11000084536
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:
Stephenie Mc Queen Name of Contact Person Law Offices of Slephanie Mc Queen Firm/Company 105 S. Narcissus anenue # 410 Address WB FL 33401 City/State and Zip Code afformering queen@aol. Com E-mail address: (tobe used for future annual report notification)
For further information concerning this matter, please call:
Stephanie Mc Queen at (561) 709-2699 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 $F(\sigma r)$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Law Offices of Stephanie Mc Queen PA 2. The principal office address: 105 S. Narcissus avenue # 410 WPB FL 338
2. The principal office address: 105 S. Narcissus avenue # 410 WPB FL 33%
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/27/// Document number: P//00 008 4536
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)
Stephanie Mc Queen
Stephanie McQueen 3850 NW Boca Raton Blud
Boca Raton 91 33431
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Same agernat, new address:
Same agent, new address: 105 S. Navcisus awenue # 410 P.O. Box NOT acceptable
WPB 2L 33401
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 Stephanie Mc Queen, Pres.
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 9/3/4 Date
If signing on behalf of an entity: Lay Offices of Stephanic Mr. Owen PA Typed or Printed Name

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