## P11000103027

	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	
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PICK-UP		MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of 3	Status
Special Instructions to		··
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	Office Use Only	
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A. BUTLER

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	I200000001	.95
	REFERENCE	:	086150	7813533
	AUTHORIZATION	:	I ha	
	COST LIMIT	:	\$ 35.00	na
ORDER DATE :	October 28, 2022			
ORDER TIME :	10:26 AM			
ORDER NO. :	086150-005			
CUSTOMER NO:	7813533			

**-** ·

#### CHANGE OF AGENT

NAME: NEIL D. KODSI, P.A.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

### 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:	NEIL D. KODSI, P.A.
·	

2. The principal office address: 8325 NE 2nd Avenue, Suite 204, Miami. FL 33138

	ng address (if different):				
4. Date of inc	corporation/qualification: December 2	2, 2011 Document i	number:	00103027	
	and street address of the current regist partment of State: (If resigned, enter r	÷ -	d office on file	2022 OCT 3	
	Kodsi, Neil D.			OCT	
	8325 NE 2nd Avenue, Suite 204	· · · · · · · · · · · · · · · · · · ·			
	Miami	FL	33138		C
6. The name (if changed	and street address of the new registere	d agent (if changed) and	d /or registered	OF STATE	י ר ר
	Corporation Service Company		<u> </u>		
	1201 Hays Street				
		P.O. Box: NOT acceptable			
	Tallahassee	FL	32301		

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.

Neil D. Kodsi President Signature of an officer or director 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. Thereby confirm that the corporation has been notified in writing of this change. Corporation Service Company

10/28/2022

Date

By: <u>Jundren M. Prason is</u> Gignature of Registered Agent Lindsey M. Baronie, Assistant Vice President

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 (04/13)