

P1200000 10740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

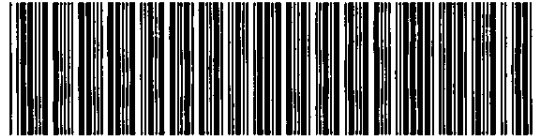
(Business Entity Name)

(Document Number)

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T. CARTER

RD change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Steven A. Imparato, P.A.
Name of Corporation

DOCUMENT NUMBER: P12000010740

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:

Steven Imparato

Name of Contact Person

Steven A. Imparato, P.A.

Firm/Company

185 NW Spanish River Blvd., Ste. 200

Address

Boca Raton, FL 33431

City/State and Zip Code

steven@simparatolaw.com

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

For further information concerning this matter, please call:

Steven Imparato

Name of Contact Person

at (561) 289-1588

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2014

STEVEN IMPARATO
STEVEN A IMPATATO, P.A.
185 NW SPANISH RIVER BLVD., STE 200
BOCA RATON, FL 33431 US

SUBJECT: STEVEN A. IMPARATO, P.A.
Ref. Number: P12000010740

We have received your document for STEVEN A. IMPARATO, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An officer/director must sign authorizing the change.

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 D Carter
Regulatory Specialist

Letter Number: 214A00022331

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: Steven A. Imparato, P.A.
2. The principal office address: 185 NW Spanish River Blvd., Ste. 200, Boca Raton, FL 33431
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/1/2012 Document number: P12000010740
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)

Steven A. Imparato

3351 NW Boca Raton Blvd.

Boca Raton, FL 33431

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

Steven A. Imparato

185 NW Spanish River Blvd., Ste. 200

P.O. Box NOT acceptable

Boca Raton, FL 33431

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☒ 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

Steven Imparato

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

10/3/14

Date

If signing on behalf of an entity:

Typed or Printed Name

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