

(Re	questor's Name)	<del></del>
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	auma ant Niumahari	
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



200252263312

10/09/13--01009--009 \*\*35.00

SECRETARY OF STATES

Q A C 17 2013

R. WHITE

## **COVER LETTER**

Amendment Section Division of Corporations

Joseph A. Belisle III P.A.

Name of Corporation

P12000015409

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:

Joseph A. Belisle III

Name of Contact Person

Leibowitz & Associates PA

Firm/Company

2 South Biscayne Blvd., Ste 2460

Miami, FL 33131

City/State and Zip Code

jabelisle3@aol.com

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

For further information concerning this matter, please call:

Joseph A. Belisle III

Name of Contact Person

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this english is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	he corporation: Joseph A. Belisle III P.A.
2. The principal Miami, Fl	office address: 2 South Biscayne Blvd., Ste 2460
3. The mailing a	ddress (if different):
4. Date of incor	poration/qualification: February 14, 2012 Document number: P12000015409
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Joseph A. Belisle III
	4400 Biscayne Blvd, Ste. 880
	Miami, FL 33137
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office 200
	Joseph A. Belisle III
	2 South Biscayne Blvd., Ste. 2460 P.O. Box NOT acceptable
	Miami, FL 33131
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
/ . 7	Joseph A. Belisle III, President  Printed or typed name and title
I further agree performance of agent. Or, if the hereby confirm	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 complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.  Output  Date  Date
If signing on be	half of an entity:
	and an Deisseld Manager
1	yped or Printed Name