P12000023573

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SECRETARY OF STATE
AND ASSECTED AND A





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COVER LETTER

TO: Amendment Section Division of Corporations Iris N Cortez, P.A. Name of Corporation P12000023573 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: Iris N Cortez Name of Contact Person Iris N Cortez, P.A. Firm/Company 5725 Monroe St. Hollywood, FI 33023 City/State and Zip Code irisncortez@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Iris N Cortez Area Code & Daytime Telephone Number 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

CR2E045 (03/12)

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

statement of ch	nange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statute organized under the laws of the State of <mark>florida</mark> registered agent, or both, in the State of Florida	
1. The name of	the corporation: Iris N Cortez,	P.A.	
2. The principa	al office address: 20185 East Co	ountry Club Dr. #2306	
Aventura	a, Florida 33180		
	address (if different): 5725 Mon ood, FI 33023	roe St.	
4. Date of inco	rporation/qualification: 3/08/201	2 Document number: P12000023	3573
	nd street address of the current regist artment of State: (If resigned, enter r	ered agent and registered office on file with the resigned)	
	Iris N Cortez		
	20185 East country Club	Dr. #2306	
	Aventura, Florida 33180		
6. The name ar (if changed)	ž –	ed agent (if changed) and /or registered office	14 NOV -6 SLORETAR TALLAHASS
	Iris N Cortez		-6 ARY SSE
	5725 Monroe St.		
		ox NOT acceptable	5: 40 STATE FLORIC
	Hollywood, Florida 3318		A
The street add	ress of its registered office and the	street address of the business office of its regis	tered agent,
		dopted by its board of directors or by an officer en notified in writing of the change.	
		Iris N Cortez, Director	
I hereby accep I further agree performance o agent. Or, if t	ture of an officer or director of the appointment as registered age to comply with the provisions of a of my duties, and I am familiar with his document is being filed merely to an that the corporation has been not	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as re- to reflect a change in the registered office addi- ified in writing of this change.	gistered ess, I
		10/31/2014	
	ignature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
	Typed or Printed Name		
	* * * FILIN	G FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314