

P12000044157

Florida Department of State

Division of Corporations
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Division of Corporations
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Account Name : BUSINESS FILINGS
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: rfontjr@gmail.com

REGISTERED AGENT CHANGE

RUBEN FONT, JR., MD, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

C. LEWIS

JUN 4 2014

EXAMINER

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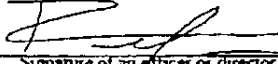
STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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: RUBEN FONT, JR., MD, P.A.
2. The principal office address: 113 S. Monroe St., 1st Floor, Tallahassee, Florida 32301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/15/2012 Document number: P12000044157
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)
FONT, RUBEN JR
10075 GATE PARKWAY NORTH, 2901
JACKSONVILLE, FL 32246
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Business Filings Incorporated
515 E. Park Avenue
Tallahassee, Florida 32301
P.O. Box NOT acceptable

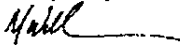
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Ruben Font Jr, President
 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

22nd day of May, 2014
 Date

If signing on behalf of an entity:

Mark Williams, AVP

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
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