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SECRETARY OF STATE

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R. WHITE

COVER LETTER

Division of Corporations
SUBJECT: LAW Of FICE OF BRITTAM RAWLINGS P.A.
DOCUMENT NUMBER: P 2060045312
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:
BuHay Pawlive Name of Contact Person
Firm/Company
1824 35 th Street MW Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (239) 293 4391 Area Code & Daytime Telephone Number
Name of Contact reison 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 Street Address: Amendment Section Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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.
1. The name of the corporation: LAW OFFICE of BNTTANY RAWLIES PA 2. The principal office address: 485 Brickell AM # 3003 Minu FL- 33131
3. The mailing address (if different): 1824 35th Street NW Washington DC 20007
4. Date of incorporation/qualification: 5/15/12 Document number: P12000045312
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) Buttory Rowling 485 Buttory Are #3003 Mimi 7L 33131 6. The name and street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed):
4SSS Shoorwater Lane P.O. Box NOT acceptable Daples FL 34119
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 Printed or typed hame 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
If signing on behalf of an entity: But Duly Roule Typed or Printed Name

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

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