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" (Re	equestor's Name)	
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SECRETARY OF STATE
DIVISION OF CORPORATION

ADM 8/12

COVER LETTER

Division of Corporations
SUBJECT: KIM R. GREENBERG, P.A. Name of Corporation
DOCUMENT NUMBER: P12 0000 6 5868
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:
KIM GREENBERG Name of Contact Person
KIM R. GREENBERG, P.A. Firm/Company
466 LORETTO AVENUE
Address .
CORAL GABLES, FL 33146 City/State and Zip Code
·
KIM-GREENBERGE HOTMAIL. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KIM GREENBERG at 954 591-3482 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person 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

CR2E045 (03/12)

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: KIM R. GREENBERG, P.A.
2. The principal office address: 333 ARTHUR GODFREY ROAD, SUITE 922
MIAMI BEACH, FL 33140
3. The mailing address (if different): 466 LORETTO AYENUE
CORAL GABLES, FL 33146
4. Date of incorporation/qualification: 7-27-2012 Document number: P1200065868
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)
KIM GREENBERG
4045 SHERIDAN AVENUE, SUITE 239
MIAMI BEACH, FL 33140
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
KIM GREENBERG
466 LORETTO AVENUE P.O. Box NOT acceptable
CORAL GABLES, FLORIDA 33146
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.
Highature of an officer or directory Kill GREENBERG 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 Ageny 11-19-2012 Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *