

**P12000075605**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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DIVISION OF CORPORATIONS  
13 AUG 26 PM 3:35

AUG 26 2013

T. BROWN

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Diane M. Souder, PA  
Name of Corporation

**DOCUMENT NUMBER:** P12000075605

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:

**Diane M. Souder**

Name of Contact Person

**Diane M. Souder, PA**

Firm/Company

**13871 Norwick Street**

Address

**Wellington, FL 33414**

City/State and Zip Code

**DianeSouder@att.net**

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

For further information concerning this matter, please call:

**Diane Souder**

Name of Contact Person

at 561 236-2974

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



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

July 30, 2013

DIANE M. SOUDER, PA  
13871 NORWICK ST  
WELLINGTON, FL 33414

**SUBJECT: DIANE M. SOUDER, PA**  
Ref. Number: P12000075605

We have received your document for DIANE M. SOUDER, PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown  
Regulatory Specialist II

Letter Number: 213A00018310

**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: Diane M. Souder, PA

2. The principal office address: 13871 Norwick Street Wellington FL 33414

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/5/12 Document number: P12000075605

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)

**CORPORATION SERVICE COMPANY**

1201 HAYS STREET

TALLHASSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Diane M. Souder

13871 Norwick Street

P.O. Box NOT acceptable

Wellington FL 33414

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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.

Diane M. Souder

Signature of an officer or director

**Diane M. Souder - Director**

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.*

Diane M. Souder

Signature of Registered Agent

8/22/13

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)