

P120000 76450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

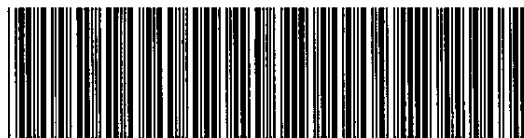
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
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OCT 10 2014  
T. CARTER

RA/RO change

Kristopher Nichols  
2440 Legacy Lake Dr.  
Maitland, FL 32751  
(407) 230-7851

September 23, 2014

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed please find a complete change of address form and a check for \$35 requesting a change of address for Nichols Law, P.A. (Document number: P12000076450).

The **NEW** registered office address is:

**2440 Legacy Lake Dr.  
Maitland, FL 32751**

The **OLD** address (the one currently on file) is:

642 N. Semoran Blvd.  
Suite 4  
Winter Park, FL 32792

I did my best to fill the form out correctly. If something is missing, please notify me as soon as possible and I will correct this.

Regards,



Kristopher Nichols  
Registered Agent

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Nichols Law, P.A.  
Name of Corporation

**DOCUMENT NUMBER:** P12000076450

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:

Kristopher Nichols  
Name of Contact Person

Nichols Law, P.A.  
Firm/Company

2440 Legacy Lake Dr.  
Address

Maitland, FL 32751  
City/State and Zip Code

Kris@nicholslaw.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristopher Nichols at (407) 230-7851  
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

**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: Nichols Law, P.A.
2. The principal office address: 2440 Legacy Lake Dr.  
Maitland, FL 32751
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9/7/12 Document number: P12000076480
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)

Kristopher Nichols  
642 N. Semoran Blvd., Suite 4  
Winter Park, FL 32792

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

2440 Legacy Lake Dr.  
P.O. Box NOT acceptable  
Maitland, FL 32751

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TALLAHASSEE, FLORIDA  
14 SEP 26 PM 4:08

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.

Kris Nichols  
Signature of an officer or director

Kristopher Nichols  
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.*

Kris Nichols  
Signature of Registered Agent

9/23/14  
Date

If signing on behalf of an entity:

Nichols Law, P.A.  
Typed or Printed Name

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