## P12000080077

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)	•					
(Document Number)						
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SECRETARY OF STATE ALLAHASSEE, FLORID 2017 JUN 29 AM 11:38

C. GOLDEN

JUL - 7 2017

## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJ	Wesley T. Dunaway, P.A.			
<b>ЭС</b> В	Name of Corporation			
DOC	P12000080077  MENT NUMBER:			
The er	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	Wesley T. Dunaway			
	Name of Contact Person			
	Wesley T. Dunaway, P.A.			
Firm/Company				
	744 S. Hampton Ave.			
	Address			
	Orlando, FL 32803			
	City/State and Zip Code			
	wes@wdunaway.com			
	E-mail address: (to be used for future annual report notification)			
For fu	ther information concerning this matter, please call:			
Wes	ey T. Dunaway 407 514-2692			
	Name of Contact Person Area Code & Daytime Telephone Number			
Enclos	ed 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 32314. 2661 Executive Center Circle Tallahassee, FL 32301			



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 7, 2017

WESLEY T. DUNAWAY 744 S. HAMPTON AVENUE ORLANDO, FL 32803

SUBJECT: WESLEY T. DUNAWAY, P.A.

Ref. Number: P12000080077

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The registered agent must sign accepting the designation.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 217A00011480

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

statement of change is	submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florido organized under the laws of the State of egistered agent, or both, in the State of	Florida		
1. The name of the corp	poration: Wesley T. Duna	way, P.A.			
2. The principal office	address: 744 S. Hampton	Ave., Orlando, FL 32803			
			·		
3. The mailing address	(if different):	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
4. Date of incorporation	n/qualification: 9/21/2012	Document number: P1200	00080077		
	address of the current registe of State: (If resigned, enter re-	red agent and registered office on file v signed)	with the		
DUN	AWAY, WESLEY T				
618 (	E. South St., Ste. 500				
ORL	ANDO, FL 32801		100 JU		
6. The name and street (if changed):	d street address of the new registered agent (if changed) and /or registered office				
DUN	AWAY, WESLEY T		ANII: 3: FSIATE		
c/o Manzo & Associates, 4767 New Broad St.  P.O. Box NOT acceptable					
					Orlar
The street address of it as changed will be iden	ts registered office and the st	rect address of the business office of i	its registered agent,		
Such change was authorized by the board	orized by resolution duly ado d, or the corporation has bee	opted by its board of directors or by an notified in writing of the change.	officer so		
<u> </u>		Wesley T. Dunaway	resident		
I further agree to comp performance of my dut agent. Or, if this docu	pointment as registered agen ply with the provisions of all ies, and I am familiar with a ment is being filed merely to	Printed or typed name and the compact to act in this capacity. Statutes relative to the proper and control accept the obligation of my position reflect a change in the registered officied in writing of this change.	mplete n as registered		
W_ J&	$\overline{}$	Wesley T. Dunaway			
Signature of I	Registeren Agent	Date			
If signing on behalf of	an entity:	•			
Wesley T.	Dunaway Pre	sident			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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