Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000234953 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from thi page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : KLETT, MESCHES & JOHNSON, P.L.

Account Number: I20130000032 Phone : (561)624-8202

: (561)621-8303 Fax Number

**Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please. **

REGISTERED AGENT CHANGE COLMANS HEARING SOLUTIONS INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statut nge is submitted for a corporation organized under the laws of the State of Florida			
	r to change its registered office or registered agent, or both, in the State of Florid	a.		
1. The name of t	he corporation: Colmans Hearing Solutions Inc			~
2. The principal	office address:			,
3. The mailing a	ddress (if different):	_		
4. Date of incorp	poration/qualification: 11/28/12 Document number: P1200009	7701		
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)		-^-	
	Stanley D. Klett		2016	
	2855 PGA Boulevard, Suite 100	SEP SEP		
	Palm Beach Gardens, FL 33410	SSEE	23	r
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	P 814	i: 9: 1	Ċ
	Stanley D. Klett	(Sm)	t -	
	4400 PGA Boulevard, Suite 304			
	PO. Box NOT acceptable Poles Record Cordons El 22410			
	Palm Beach Gardens, FL 33410			
The street address changed will	ess of its registered office and the street address of the business office of its regi be identical.	istered a	gent,	
	is authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.			
Signate	of an afficient Printed or typed name and title			
nariarmanara ai	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as residential is being filed merely to reflect a change in the registered office adduted the corporation has been notified in writing of this change.		d	
30	COUNT 9/33/16 nature of Registered Agent Date			
•	half of an entity:			
Stanley D. I				
Т	yped or Printed Name			

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