P12000103567

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



100260539581

06/13/14--01029--017 **35.00

SECIFE ARY OF STATE TALL ASSESSED FOR STATE OR 101.

RAIRO Charse

JUN 27 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Dyer Law Firm, P.A.

Name of Corporation

DOCUMENT NUMBER:

P12000103567

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:

Christopher Dyer

Name of Contact Person

Dyer Law Firm

Firm/Company

3030 Starkey Blvd. Suite 185

Address

New Port Richey, Florida

City/State and Zip Code

chris@dyerknudsen.com

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

For further information concerning this matter, please call:

Christopher Dyer

, 813

463-8014

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of or to change its registered office or registered agent, or both, in the State of	Florida		_
1. The name of t	the corporation: The Dyer Law Firm, P.A.			
2. The principal	office address: 3030 Starkey Blvd, Suite 185, New Port Ric	hey, F	lorida	34655
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 12/24/12Document number: P120	00103	3567	
5. The name and	d street address of the current registered agent and registered office on file returnent of State: (If resigned, enter resigned)	with the		
	Christopher Dyer			
	8520 Government Drive, Suite 4	_		
	New Port Richey, Florida, 34654			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	- office	14 JUN 13	ECS (A)
	Dyer Knudsen, Pllc	_		
	708 South Church Avenue	_	PH 12: 21	ا نتار دی. برندار
	P.O. Box NOT acceptable Tampa, Florida 33609	_	24	NIDA NICA
The street addre	ess of its registered office and the street address of the business office of be identical.	its regist	tered ag	ent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an board, or the corporation has been notified in writing of the change.	officer	so	
Signatu	Gresbert Christopher Dio! Printed or typed name and to	resdev	ત †	
-	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 comy duties, and I am familiar with and accept the obligation of my positic is document is being filed merely to reflect a change in the registered off that the corporation has been notified in writing of this change.		gistered ess, I	,
C. Dy Sign	Part Policy 6/5/14 Date Date			_ _
	half of an entity:			
Christopher C. I	Dyer, Partner, Dyer Knudsen, Pllc			
T	vived or Printed Name			

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