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SECRETARY OF STATE

C. LEWIS

MAY 2 2 2014

EXAMINER

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SURJECT: BJE LAW, PA

Name of Corporation

DOCUMENT NUMBER:

46-1698310

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:

**BRIAN J. ESPOSITO** 

Name of Contact Person

BJE LAW, PA

Firm/Company

4230 S. MACDILL AVENUE, SUITE 228

Address

TAMPA, FLORIDA 33611

City/State and Zip Code

**BRIAN@BJELAW.COM** 

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

For further information concerning this matter, please call:

BRIAN J. ESPOSITO

,813 、2

\_ at (\_\_

2 Code & Daytime Telephone Number

Name of Contact Person

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

1000

1. The name of the corporation:  BJE LAW, PA  2. The principal office address:  4230 S. MACDILL AVENUE, SUITE 228, TAMPA, FLORIDA, 33611  3. The mailing address (if different):  4. Date of incorporation/qualification:  JANUARY 2013 Document number:  46-1698310-P/3000  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)  BRIAN J. ESPOSITO  511 W. BAY STREET, SUITE 350  TAMPA, FLORIDA 33606  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  BRIAN J. EPOSITO  4230 S. MACDILL AVENUE, SUITE 228  FO. Box NOT acceptable  TAMPA, FLORIDA 33611  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.  BRIAN J. ESPOSITO  Fined or typed aname and office address. I hereby cacept the appointment as registered gent 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 dulies, and I am familiar with and accept the obligation of my position as registered agent and agree to act in this capacity. I hereby confirm that the proporation has been notified in writing of this change.  MAY 6, 2014  Signature Registered Agent  If signing on behalf of an entity:  BRIAN J. ESPOSITO  Typed or Printed Name	statement of cha	inge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, mized under the laws of the State of FLORID tered agent, or both, in the State of Florida.	
4. Date of incorporation/qualification: JANUARY 2013 Document number: 46-1698310 PI30000  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)  BRIAN J. ESPOSITO  511 W. BAY STREET, SUITE 350  TAMPA, FLORIDA 33606  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  BRIAN J. EPOSITO  4230 S. MACDILL AVENUE, SUITE 228  P.O. Box NOT acceptable  TAMPA, FLORIDA 33611  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.  BRIAN J. ESPOSITO  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. I flist adocument is being filled merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.  MAY 6, 2014  Signature of Registered Agent  If signing on behalf of an entity:  BRIAN J. ESPOSITO	<ol> <li>The name of</li> <li>The principal</li> </ol>	office address: 4230 S. MACDILL	AVENUE, SUITE 228, TAMPA, FLO	RIDA, 33611
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BRIAN J. ESPOSITO	7		Date	
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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 \* \* \*