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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVEB AND FILED

C. LEWIS

OCT 3 U 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Diane G Justo PA				
Name of Corporation				
DOCUMENT NUMBER: P 13 0 0 0 0 10 15 6				
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:				
Diane G. Justo				
Name of Contact Person				
Diane G. Justo PA				
Firm/Company				
435 NE 121st Street, #201				
Address				
North Miami, Fl. 33161				
City/State and Zip Code				
diane@djusto.com				
E-mail address: (to be used for future annual report notification)				
For forther information accomming this ways allowed to				
For further information concerning this matter, please call:				
Diane G. Justo Name of Contact Person Name of Contact Person at (786) 294-1810 Area Code & Daytime Telephone Number				
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 che	ange is submitted for a corporation org	1502, 607.1508, or 617.1508, Florida Statutes ganized under the laws of the State of <mark>Florida</mark> sistered agent, or both, in the State of Florida.	· · ·		
1. The name of	the corporation: Diane G. Justo	PA			
2. The principal	office address: 435 NE 121st St	reet #201, North Miami, Fl. 3316	1		
3. The mailing a	address (if different): same				
4. Date of incor	poration/qualification: 01 30 20	Document number: P13000	010156		
	d street address of the current registere rtment of State: (If resigned, enter resigned,	d agent and registered office on file with the gned)			
	CORPORATION SERVIC	E COMPANY			
	1201 HAYS STREET				
	TALLA HASSEE, PL.	32301	3 OCT		
TAUA HASSEE, PL. 3230] 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Diane G. Justo 135 NE 121st Street #201					
	Diane G. Justo		# 10: 10 F STATE FLORID		
	435 NE 121st Street, #201				
	P.O. Box NOT acceptable				
	North Miami, Fl. 33161				
The street addras changed will	ess of its registered office and the stre be identical.	eet address of the business office of its regist	ered agent,		
	~	ted by its board of directors or by an officer notified in writing of the change.	so		
Diane	a. Justo	Diane G. Justo, owner			
I hereby accept I further agree performance of agent. Or, if th	the appointment as registered agent to comply with the provisions of all si my duties, and I am familiar with an is document is being filed merely to r that the corporation has been notified	Printed or typed name and title and agree to act in this capacity. Intuities relative to the proper and complete d accept the obligation of my position as reg effect a change in the registered office addre d in writing of this change.	gistered ess, I		
Diariel	g. Justo	10/22/2013			
Sig	moure of degistered Agent	Date			
If signing on bo	chalf of an entity:				
Diane G. Je	······································				
L.	'yped or Printed Name				

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 * * *