P13000012555

(Requestor's Name) (Address) (Address)	500345479975		
(City/State/Zip/Phone #)	05/01/2001024015 **35.00 SECRETARY OF STATE NALLAHASSEE. FLORIDA		
Office Use Only	JUH 1 7 2020		

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Tayon Law P.A. Name of Corporation

## DOCUMENT NUMBER: P13000012555

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:

Kathy Jacobs Tayon	
Name of Contact Person	
Tayon Law P.A.	
Firm/Company	
250 95th Street #6781	
Address	
Surfside, FL 33154	
City/State and Zip Code	
kathy.tavon@tavonlaw.com	

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

For further information concerning this matter, please call:

Kathy Jacobs Tayon	at ( <sup>305</sup>	761-1692
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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida \_\_\_\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Tayon Law P.A.

2. The principal office address: 250 95th Street #6781, Surfside, FL 33154

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: <u>02/05/2013</u> Document number: <u>P13000012555</u>

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)

	Kathy Jacobs Tayon			
	12864 Biscayne Blvd. #279	SECR FALLA	2828	
	North Miami, FL 33181	re Inr AHASS	UN -	۳. ۳.
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered offi		ΡĦ	** **** *
(ir changed).	Kathy Jacobs Tayon	DRID,	1:3	

250 95th Street #6781

P.O. Box\_NOT acceptable

Surfside, FL 33154

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.

vature of an officer

Authorized Officer

Printed or lyped 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, if this document is being filed merely to reflect a change in the registered office address. Thereby confirm that the corporation has been paified in writing of this change.

gnature of R gistered Agent

If signing on behalf of an entity:

Typed or Printed Name

5/28/2020

Date

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)