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Office Use Only



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COVER LETTER

TO:

Amendment Section Division of Corporations

SURJECT. Douglas Law, PA

Name of Corporation

DOCUMENT NUMBED.

P13000021330

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:

Patrick Douglas

Name of Contact Person

Douglas Law, PA

Firm/Company

177 NW Madison Street

Address

Lake City, FL 32055

City/State and Zip Code

Patrick@DouglasandCarter.com

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

For further information concerning this matter, please call:

Patrick Douglas

,904

327-1804

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

CR2E045 (03/12)

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

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statement of cha	te provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of	, 	
	der to change its registered office or registered agent, or both, in the State of Florida.		
	of the corporation: Douglas Law, PA		
2. The principal	al office address: 177 NW Madison St, Lake City, FL 32055		
3. The mailing	g address (if different):		
4. Date of incor	prporation/qualification: 3/6/2013 Document number: P13000021330	-	
5. The name an	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)		
	Sara J Carter		
	101 NE 3rd Avenue, Suite 1500		
	Fort Lauderdale, FL 33301	15	314.5.E
6. The name an (if changed):	and street address of the new registered agent (if changed) and /or registered office):	15 HAY 14	
	Sara J Carter		- शुक्तात - द्यु
	177 NW Madison St	-, 5	14 (1) 14 (1) 14 (1)
	P.O. Box NOT acceptable	0	X.
	Lake City, FL 32055		
The street addr as changed wil	dress of its registered office and the street address of the business office of its registered a ill be identical.	igent,	
Such change w	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.		
Patri	/ // / <u> </u>	21Vl	ent
I further agree performance o	pt the appointment as registered agent and agree to act in this capacity. te to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registere this document is being filed merely to reflect a change in the registered office address, I m that the corporation has been notified in writing of this change.	ed .	
Sign	Signature of Registered Agent Date	·	
If signing on be	behalf of an entity:		
	Typed or Printed Name		
	* * * 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 (03/12)

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