P13000045445

			}
(Re	equestor's Name)		_
(Ad	ldress)		_
(Ad	dress)		_
(Cit	y/State/Zip/Phone	#)	_
PICK-UP	WAIT	MAIL	
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Certified Copies	_ Certificates	of Status	-
Special Instructions to	Filing Officer:	<u> </u>	1
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Gentry Elder Law, P.A. Name of Corporation	
DOCUMENT NUMBER: P13000045445	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fi	iling.
Please return all correspondence concerning this matter to the following:	
Brooks N. Gentry, Esq.	
Name of Contact Person	
Gentry Elder Law, P.A.	
Firm/Company	
PO Box 415	
Address	
Bay Pines, FL 33744	
City/State and Zip Code	
Brooks@GentryElderLaw.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Brooks N. Gentry, Esq. at (727)386-8819	
Brooks N. Gentry, Esq. at (727) 386-8819 Name of Contact Person Area Code & Daytime Telep	phone 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

statement of cha	inge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida tered agent, or both, in the State of Florida.	
	the corporation: Gentry Elder Law, P.A.	•	
2. The principal	office address: 10000 Bay Pines Blvd Bl	dg 20, Bay Pines, FL 33744	
3. The mailing a	address (if different): PO Box 415, Bay	Pines, FL 33744	
4. Date of incorr	poration/qualification: 05/20/2013	Document number: P13000045445	
5. The name and	•	agent and registered office on file with the	
	Brooks N. Gentry, Esq.		
	10575 68th Ave STE B3 (yes, changin	g address only)	
	Seminole, FL 33772		
6. The name and (if changed):	I street address of the new registered ag	ent (if changed) and /or registered office	
	Brooks N. Gentry, Esq. (unchanged)		~)
	10000 Bay Pines Blvd Bldg 20	ox NOT acceptable	n91
	P.O. B	ox NOT acceptable	≣ .,
	Bay Pines, FL 33744		<u>.</u> ;
The street addre	ess of its registered office and the stree be identical.	t address of the business office of its registered a	
Such change was authorized by th	as authorized by resolution duly adopte the board, or the corporation has been n		9Û :3
	The same of the sa	Brooks N. Gentry. Esq.	
Signatur	re of an officer or director	Printed or typed name and title	
I further agree to of my duties, an document is bei	the appointment as registered agent a to comply with the provisions of all sta ad I am familiar with and accept the ob ing filed merely to reflect a change in t s been notified in writing of this chang	itutes relative to the proper and complete perform digation of my position as registered agent. Or , the registered office address, I hereby confirm the	nance if this at the
	III.	May 28, 2021	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Brooks N. Gentry	· · ·		
11.	small or Drintal Name		

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

MAKE CHECKS BAYADI E TO FLODIDA DEBARTMENT OF STATE