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January 6, 2016

## VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: A. STICKLEY III, P.A. (Employer I.D. #46-3422844)

Dear Sir or Madam:

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:

ALBERT STICKLEY III, ESQUIRE THE LAW OFFICE OF A. STICKLEY III, P.A. 737 Indiana Ave.

> Englewood, FL 34233 Email: ai@stickleylaw.com

For further information concerning this matter, please call Albert Stickley, III at: (941) 474-5506.

Enclosed is a \$35.00 check made payable to the Department of State.

Sincerely

Ibert Stickley III, Esquire

737 S. Indiana Ave.

Englewood Florida, 34223 Phone: (941) 474-7768

Email: aj@stickleylaw.com

/jep

Enclosures

statement of change is submitted for a corporation organized under the laws of the State of Holida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The law Object of A. Stickley, III, P.A.  2. The principal office address: 131 Indiana Avenue
Englewood Fl 34223
3. The mailing address (if different):
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/13/13 Document number: P13000 6683
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)
Albert Stickley, III
359 West Dearborn Street
Englewood, FL 34223
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Albert Stickley, III
737 Indiana Avence
Englewood, FL 34213 SA 8
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.
Albert Stickley III Printed or typed hame aid 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, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Albert Stickley 14 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)