

P130000070081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

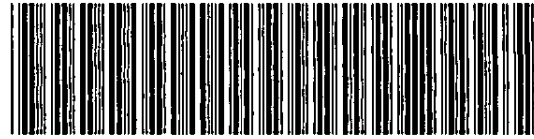
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700256911747

02/20/14--01007--020 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB -7 PM 12:46

Rdch8  
@ 3.7.14

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Stephen Mangan DMD PA.  
Name of Corporation

DOCUMENT NUMBER: P13000070081

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:

Stephen Mangan  
Name of Contact Person

Firm/Company

6140 SW 24th place. #100  
Address

Davie, FL 33314  
City/State and Zip Code

doctormangan@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Weum at (561) 3583944  
Name of Contact Person Area Code & Daytime Telephone Number

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

→ Already mailed.

**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



RECEIVED

14 MAR -7 AM 10:47

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 21, 2014

STEPHEN MANGAN  
6140 SW 24TH PLACE  
#106  
DAVIE, FL 33314

SUBJECT: STEPHEN MANGAN DMD PA  
Ref. Number: P130C0070081

We have received your document for STEPHEN MANGAN DMD PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 014A00003925

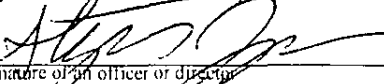
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

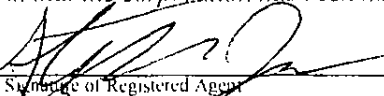
1. The name of the corporation: Stephen Mangan DMO PA.
2. The principal office address: 6140 SW 24th Place, #106  
Davie, FL 33314
3. The mailing address (if different): 6140 SW 24th Place, #106  
Davie, FL 33314
4. Date of incorporation/qualification: 8.22.13 Document number: PB000070081
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  
Stephen Mangan  
501 SE 2nd St.  
#520  
Ft Lauderdale, FL 33301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Stephen Mangan  
6140 SW 24th Pl.  
#106  
Davie, FL 33314

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.

 _____ Signature of an officer or director	<u>Stephen Mangan</u> _____ Printed or typed 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, I hereby confirm that the corporation has been notified in writing of this change.

 _____ Signature of Registered Agent	<u>3/2/14</u> _____ Date
---	--------------------------------

If signing on 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)

FILED  
SECRETARY OF STATE  
14 MAR -7 PM 12:46