P13000082435

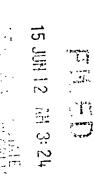
(Re	questor's Name)			
(Add	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



100273748171

06/12/15--010US--008 **35.00



JUN 2 3 2015 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Law Offices of Kawass, P.A.

Name of Corporation

DOCUMENT NUMBER: P13000082435

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:

Kristen Kawass

Name of Contact Person

Law Offices of Kawass, P.A.

Firm/Company

8724 Sunset Drive, #167

Address

Miami, Florida 33173

City/State and Zip Code

kristen@kawasslaw.com

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

For further information concerning this matter, please call:

Kristen Kawass

.,305

301-3525

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

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of .	Florida	-
1. The name of t	he corporation: Law Offices of	of Kawass, P.A.	•	
2. The principal	office address: 8724 Sunset I	Drive, #167, Miami, Florida 33	173	
3. The mailing a	ddress (if different): 8724 Sun	set Drive, #167, Miami, Florida	a 33173	
4. Date of incorp	poration/qualification: 10/07/20	Document number: P1300	00082435	
5. The name and		tered agent and registered office on file w	rith the	
	Kristen Kawass		_	
	8724 Sunset Drive, #167	7	_	
	Miami, Florida 33173			
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered of	Mice 5	s design g parter g c
	Р.О В	Sox NOT acceptable		A PER S
The street addre	ess of its registered office and the be identical.	street address of the business office of it	ts registered age	nt,
	_	dopted by its board of directors or by an een notified in writing of the change.	officer so	
gQ.	Kawaes.	Kristen Kawass		_
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered ag o comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not	Printed or typed name and ti ent and agree to act in this capacity. Ill statutes relative to the proper and con and accept the obligation of my position to reflect a change in the registered offici lifted in writing of this change.	nnlete	
de	Hawas.	06/05/2015		
_	natule of Registered Agent	Date		-
If signing on be	half of an entity:			
Т	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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