

P14000020456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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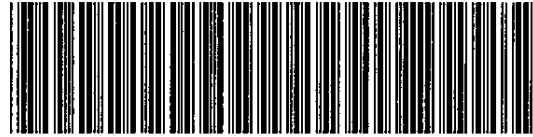
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 31 2014  
C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Eye Doctors of Tampa Bay Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P14000020456

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:

Jennifer C. Welter  
Name of Contact Person

Eye Doctors of Tampa Bay Inc  
Firm/Company

20905 Eustis Rd.  
Address

Land O Lakes, FL 34637  
City/State and Zip Code

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

For further information concerning this matter, please call:

Jennifer Welter at (727) 808-2751  
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**

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

1. The name of the corporation: Eye Doctors of Tampa Bay Inc.
2. The principal office address: 20905 Eustis Rd  
Land O Lakes, FL 34637
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: March 5, 2014 Document number: P14000020456
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)

Noel Brown / NTB Services LLC  
1080 Knotty Pine Ave  
North Port, FL 34288

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jennifer Welter  
20905 Eustis Rd  
Land O Lakes, FL 34637

P.O. Box NOT acceptable

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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.

Jaw  
Signature of an officer or director

Jennifer Welter / president  
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.

Jaw  
Signature of Registered Agent

March 27, 2014  
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