

P14000029424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

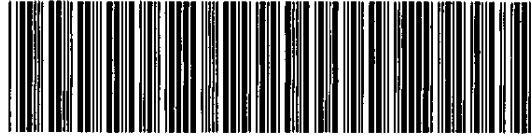
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

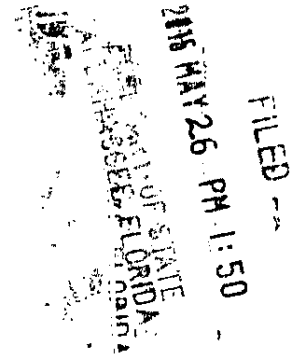
Office Use Only



000273085920

RA address
change

05/26/15--01018--003 **35.00



MR
5/29/15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TATYANA BOGDANOVA-SALLEE P.A.
Name of Corporation

DOCUMENT NUMBER: P14000029424

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:

TATYANA BOGDANOVA-SALLEE
Name of Contact Person

Firm/Company

2250 ARCADE DR. UNIT 1704
Address

NAPLES, FL 34109
City/State and Zip Code

TATYANA555@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TATYANA BOGDANOVA-SALLEE at (239) 293-5017
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 the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TATYANA BOGDANOVA-SALLET P.A.
2. The principal office address: 2250 ARIELLE DRIVE UNIT 1704
NAPLES, FL 34109
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/1/2014 Document number: P14000029424
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)

RICHARD SALLET
823A MEADOWLAND DRIVE
NAPLES, FL 34108

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

RICHARD SALLET
2250 ARIELLE DRIVE UNIT 1704
P.O. Box NOT acceptable
NAPLES, FL 34109

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.

Tatyana Bogdanova-Sallet
Signature of an officer or director

TATYANA BOGDANOVA-SALLET PD
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.

Tatyana Bogdanova-Sallet
Signature of Registered Agent

5/20/15
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