## P14000036049

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #	r)
PICK-UP	WAIT	MAIL
(Ві	usiness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Jessie Perez, P.A.

Name of Corporation

P14000036049

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:

Jessie Perez

Name of Contact Person

Jessie Perez, P.A.

Firm/Company

820 Sky Pine Way, Unit B-2

Greenacres, FL 33415

City/State and Zip Code

ipnow441@gmail.com

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

For further information concerning this matter, please call:

Jessie Perez

Area Code & Daytime Telephone Number

Name of Contact Person

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	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida	<u> </u>	
1. The name of	the corporation: Jessie Perez PA		
	office address: 820 Sky Pine Way, Unit B-2, Greenacres, FL 334	115	
3. The mailing a	ddress (if different):		
4. Date of incor	poration/qualification: 04/22/14Document number: P14000036	3049	
	d street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)		
	Corporation Service Company		
	1201 Hays Street	· 7.0 =	
	Tallahassee, FL 32301	4 OCT 27 SEURETAR	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Jessie Perez	AM 2: 02 OF STATE E. FLORIC	
	820 Sky Pine Way, Unit B-2	D2 ATE RIDA	
	P.O. Box NOT acceptable  Greenacres, FL 33415		
The street address changed will	ess of its registered office and the street address of the business office of its regis be identical.	tered agent,	
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer board, or the corporation has been notified in writing of the change.	so	
M	Jessie Perez Printed or typed name and title		
A hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as rejist document is being filed merely to reflect a change in the registered office additional that the corporation has been notified in writing of this change.	zistered ess, I ————	
JESSIE	half of an entity:		

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