P1400082307

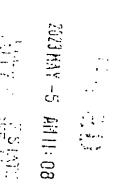
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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05/05/23--01011--010 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: LAW OFFICE OF DAVID A. GUNTER. Name of Corporation			
DOCUMENT NUMBER: P14000082307			
The enclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
SUSAN P. GUNTER			
Name of Contact Person			
LAW OFFICE OF DAVID A. GUNTER, P.A.			
Firm/Company			
6767 N. WICKHAM ROAD, SUITE 4001			
Address			
MELBOURNE, FL 32940-2025			
City/State and Zip Code			
susan@gunterlawoffice.com			
E-mail address: (to be used for future annual re	port notification)		
For further information concerning this matter, plea	ise call:		
SUSAN P. GUNTER	at (321) 428-4224 Area Code & Daytime Telephone Number		
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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation org	502, 607,1508, or 617,1508. Florida State unized under the laws of the State of <mark>Flor</mark> stered agent, or both, in the State of Flori	ida
	he corporation: LAW OFFICE OF DAY		
2. The principal	office address: 6767 N. WICKHAM RD	., SUITE 4001, MELBOURNE, FL 32940-	2025
3. The mailing a	ddress (if different): P.O. BOX 411275	, MELBOURNE, FL 32941-1275	
4. Date of incor	ooration/qualification: OCTOBER 6, 20	MELBOURNE, FL 32941-1275 Document number: P1400008230)7
	I street address of the current registered timent of State: (If resigned, enter resig	lagent and registered office on file with t ned)	he
	DAVID A. GUNTER, ESQ.		
	7351 OFFICE PARK PLACE, SUITE 1	53	16787
	MELBOURNE, FL 32940-8229		2020 HAY -5
6. The name and (if changed):	I street address of the new registered ag	gent (if changed) and /or registered office	S WIII: 00
	DAVID A. GUNTER, ESQ.		0:
	6767 N. WICKHAM RD., SUITE 4001		C
		Box, NOT acceptable	
	MELBOURNE, FL 32940-2025		
The street address changed will	ess of its registered office and the stre be identical.	et address of the business office of its re	gistered agent.
Such change wanthorized by the	is authorized by resolution duly adoption board, or the corporation has been	led by its board of directors or by an off notified in writing of the change.	icer so
	AM	DAVID A. GUNTER, PRESIDENT	
C	re of an Wicer or director	Printed or typed name and title	
Thereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent of comply with the provisions of all stand I am familiar with and accept the of the filed merely to reflect a change in their points of this change.	ind agree to act in this capacity, atures relative to the proper and comple bligation of my position as registered ag the registered office address, I hereby c ge.	te performance zent. Or, if this onfirm that the
1	MA	MAY 3, 2023	
Sig	nature of Registered Agent	Date	
If signing on bo	half of an entity:		
	A · Gunter yped or Printed Name		

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