P150000002496

| (Re | equestor's Name) | | | |
|---|--------------------|-----------|--|--|
| (Address) | | | | |
| (Ad | ldress) | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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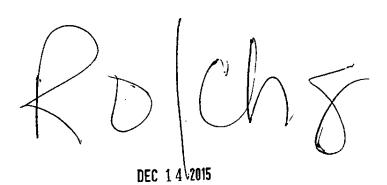
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I ALBRITTON

COVER LETTER

TO: Amend

Amendment Section Division of Corporations

Surject: Jared W. Gasman, Attorney, P.A.

Name of Corporation

DOCUMENT NUMBER, P150

P15000002496

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:

Jared Gasman

Name of Contact Person

Jared W. Gasman Attorney, P.A.

Firm/Company

5353 N. Federal Highway, Ste 402

Address

Fort Lauderdale, Florida 33308

City/State and Zip Code

jgasman@gasmanlaw.com

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

For further information concerning this matter, please call:

Jared Gasman

,954

771-7050

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 organi | 2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Florida red agent, or both, in the State of Florida. | |
|---|---|--|--|
| | he corporation: Jared W. Gasman | | |
| 2. The principal | office address: 2929 E. Commercial | Blvd. Suite 702, Fort Lauderdale, Fl 33308 | |
| 3. The mailing a | ddress (if different): | | |
| 4. Date of incorp | poration/qualification: 01/09/2015 | | |
| | street address of the current registered ag tment of State: (If resigned, enter resigned | | |
| | Jared W. Gasman | 705 SE 2015 | |
| | 2929 E. Commercial Blvd, Suite 702 | | |
| | Fort Lauderdale, Fl 33308 | AAAAY SSEE | |
| Jared W. Gasman 2929 E. Commercial Blvd, Suite 702 Fort Lauderdale, FI 33308 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | | | |
| | Jared W. Gasman | ÖF: 6 | |
| | 5353 N. Federal Highway, S | | |
| | Fort Lauderdale, FI 33308 | acceptable | |
| The street addre | ss of its registered office and the street a be identical. | address of the business office of its registered agent, | |
| Such change wa authorized by th | s authorized by resolution duly adopted e board, or the corporation has been not | by its board of directors or by an officer so ified in writing of the change. | |
| - Jack U | /. Has | Jared W. Gasman, Director Printed or typed name and title | |
| I hereby accept I further agree t performance of agent. Or, if thi | the appointment as registered agent and o comply with the provisions of all statu | l agree to act in this capacity. tes relative to the proper and complete cept the obligation of my position as registered ct a change in the registered office address, I | |
| <u>.</u> | | D | |
| - | nature of Registered Agent half of an entity: | Date | |
| ii signing on be | imii or an oning. | | |
| Ту | ped or Printed Name | | |

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