P 15000030300

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OCT 21 2015

I ALBRITTON

COVER LETTER

Division of Corporations
SUBJECT: Jeffrey A. Lungsen PA Name of Corporation
DOCUMENT NUMBER: P15 0000 303 60
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:
LAUGA LINGSLY Name of Contact Person
Name of Contact Person
Luhisen Law Group
Firm/Company
Name of Contact Person Luh (Sen Law Group Firm/Company 1436 N. Tami ani Tail Address Sarasita FL 34243
Address
Sapasita, FL 34243 City/State and Zip Code
City/State and Zip Code
LLindsey @ Luhrgen.com
E-mail address: (to be used for future annual report notification)
For forther information agreeming this matter places will
For further information concerning this matter, please call:
Name of Contact Person at (C13, 892 3345) 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 Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section



October 6, 2015

LAURA LINDSEY LUHRSEN LAW GROUP 7430 N. TAMIAMI TRAIL SARASOTA, FL 34243

SUBJECT: JEFFREY A. LUHRSEN, P.A.

Ref. Number: P15000030360

We have received your document for JEFFREY A. LUHRSEN, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the corporate document number in part 4(four) of the form and the new registered agent information in part 6(six) of the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 815A00021068



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	
in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 2. The principal office address: 1. Tamiam i Tail	
2. The principal office address: 1920 10 Taward 1941 Surasofa, FL 34343	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 4/2/15 Document number; P150000 303	<u>_</u> 3
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)	
1201 Hugs Street	
1201 Hays Street	
- Janatassa FZ 32301	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Laura Luh Ben Lindsey Es =	
11803 Carrollwood Village CV	
Tampa, FL 33618	1
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 esolution duly adopted by its board of directors or by an officer so authorized by the board or the exporation has been notified in writing of the change.	
Signature of an officer or director Telffly A Luli Sen Printegor 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.	
Signature of Registered Agent 9/3/15 Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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