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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Paula Korlowski Shaheen PA Name of Corporation
DOCUMENT NUMBER: P 15000034396
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:
Paula Shaheen Name of Contact Person
Paula Kizlowski Shaheen 14 Firm/Company
1275 Yellowheart Way Address
Holly 1000 PL 33019 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pula Shuheen at (954) 282 - 9597 Name of Contact Person at (Ode & Daytime Telephone Number
England is a \$25.00 about made moughly to the Department of State

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Paula Kozlowski Shaheen PA
2. The principal office address: 1275 Vellowheart Way
Hollywood, Fl 33079
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/15/2015 Document number: P15000034396
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)
Corporation Service Company (a Cinti
1201 Hays Street
Tauahassee Fl 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Paula Shaheen 5 5
1275 Yellowheart Wan
P.O. Box NOT acceptable
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.
Figurature of an officer of director 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.
Signature of Registered Agent 10-22-15 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