P15000040077

(Re	equestor's Name)	
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COVER LETTER

Division of 0	Section Corporations	
SUBJECT:	Sharon L. May Name of Co	P.A. orporation
DOCUMENT NUM	BER: <u>P150000400</u>	177
The enclosed Statem	ent of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all corr	espondence concerning this matter	to the following:
	Diane Conv Name of Cor Tax Savers of Firm/Co	
_		th Road Suite 12
Bonita Springs, Florida 34134 Chy/State and Zip Code		
Ē	+axsavers@en	nbarg mail. com uture annual report notification)
For further informati	on concerning this matter, please of	all:
Diane	Conrad of Contact Person	at (239) 947-1284 Area Code & Daytime Telephone Number
Enclosed is a \$35.00	check made payable to the Depart	ment 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Sharon L. May P.A.
2. The principal office address: 8088 Sanctuary Dr. # 2
Naples, FL 34104
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/04/2015 Document number: P15000040077
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)
Business Filings Incorporated
1200 South Pine Island Road
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Tax Savers of America, Inc.
3465 Bonita Beach Road Suite 12 P.O. Box NOT acceptable
Bonita Springs, FL 34134
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.
Signature of an officer or 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 10/10/16
If signing on behalf of an entity:
DIANE CONIAD Typed or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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