

PK 000040137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bryan Sawchuk Professional Assn
Name of Corporation

DOCUMENT NUMBER: P15000040137

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:

Bryan Sawchuk

Name of Contact Person

Bryan Sawchuk Professional Assn

Firm/Company

401 E Las Olas Blvd 130-341

Address

Ft Lauderdale, FL 33301

City/State and Zip Code

bryansawchuk@gmail.com

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

For further information concerning this matter, please call:

Bryan Sawchuk

Name of Contact Person

at (954) 290-2776

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

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: Bryan Sawchuk Professional Association
2. The principal office address: 401 East Las Olas Blvd Suite 130
Fort Lauderdale, Florida 33301
3. The mailing address (if different): 401 East Las Olas Blvd Suite 130-341
Fort Lauderdale, Florida 33301
4. Date of incorporation/qualification: _____ Document number: _____
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)

Bryan Sawchuk

2657 Middle River Drive

Fort Lauderdale, Florida 33306

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Bryan Sawchuk


401 East Las Olas Blvd Suite 130

P.O. Box NOT acceptable

Fort Lauderdale, Florida 33301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

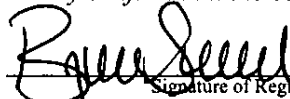
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Bryan Sawchuk

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

June 1, 2017

Date

If signing on behalf of an entity:

Bryan Sawchuk
Typed or Printed Name

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