## P15000055197

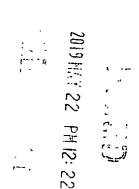
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R. WHITE MAY 23 2019

## **COVER LETTER**

Division of Corporations

SUBJECT: LAW OFFICES OF TARA DAVID, P.A.

Name of Corporation

DOCUMENT NUMBER: P15000055157

Amendment Section

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:

Douglas J. Jeffrey, Esq.

Name of Contact Person

Law Offices of Douglas J. Jeffrey, P.A.

Firm/Company

6625 Miami Lakes Drive East, Suite 365

Address

Miami Lakes, FL 33014

City/State and Zip Code

dj@jeffreylawfirm.com

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

For further information concerning this matter, please call:

Douglas J. Jeffrey, Esq. at 305 828-4744

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

TO:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida	
in orde	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: LAW OFFICES OF TARA DAVID, P.A.	
2. The principal	al office address: 2401 EAST ATLANTIC BOULEVARD, SUITE 200, POMPANO BEACH, FL 330	62
3. The mailing	address (if different): N/A	
4. Date of incor	rporation/qualification: 06/24/2015 Document number: P15000055157	<del></del>
	and street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Douglas J. Jeffrey, Esq.	
	6625 Miami Lakes Drive East, Suite 379, Miami Lakes, FL 33014	
	6625 Miami Lakes Drive East, Suite 379, Miami Lakes, FL 33014	-(17) \$
6. The name and (if changed):	ad street address of the new registered agent (if changed) and /or registered office	- ;
	8625 Miami Lakes Drive East, Suite 365, Miami Lakes, FL 33014	67
	P.O. Box NOT acceptable	
The street addre	ress of its registered office and the street address of the business office of its registered agent,	
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, it the corporation has been notified in writing of the change.	
	Tara S. David, Esq., P	
hereby accept further agree to performance of agent. Or, if this lereby confirm.	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered us document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.  Date  Chalf of an entity:	
Ty	ypod or Printed Name	

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