## P 1500013151

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## **COVER LETTER**

Amendment Section TO: Division of Corporations AMMCPA Inc Name of Corporation P15000073151 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: Alayna Manville Name of Contact Person AMMCPA Inc Firm/Company 3411 Morning Lake Dr Unit 201 Estero, FL 34134 City/State and Zip Code Alayna@ammcpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alayna Manville Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: AMMCPA Inc	
2. The principal	office address: 3411 Morning Lake Dr Unit 201, Estero, FL 34134	
3. The mailing a	address (if different): PO Box 110875, Naples FL 34108	
	poration/qualification: 9/1/2015 Document number: P15000073151	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	6812 Satinleaf Rd S	
	202	
	202 Naples, FL 34108	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of ige -	
	3411 Morning Lake Dr Unit 201	
	Estero FL 34108	
	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, I be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Signatu	ure of an Albert of director Alice (1951 Dec.)	-
I hereby accept Uturther agree performance of agent. Or, if th hereby confirm	t 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 f my duties, and I am familiar with and accept the obligation of my position as registered all document is being filed merely to reflect a change in the registered office address, I at that the corporation has been notified in writing of this change.	
Six	gnature of Rogistered Agent Date	
	chalf of an entity:	
Alayna Ma	inville President	
Т	Typed or Printed Name	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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