P15000081183

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE TALLAHASSEE FLORIDA

FEB 1 8 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Melville Law, P.A.

Name of Corporation

P1500081183

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:

Drew T. Melville

Name of Contact Person

Melville Law, P.A.

Firm/Company

101 NE 3rd Avenue, Suite 1500

Address

Fort Lauderdale/Florida 33301

City/State and Zip Code

drew@drewmelville.com

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

For further information concerning this matter, please call:

Drew T. Melville

,954

336-9366

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

STÄTEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation organi.	, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of <mark>Florida</mark> red agent, or both, in the State of Florida.		
	he corporation: Melville Law, P.A.	ea agent, or voin, in the state of Piortaa.		
2. The principal	office address: 101 NE 3rd Avenue	e, Suite 1500		
4. Date of incorp	poration/qualification: 9/30/2015	Document number: P15000081183	1	
	street address of the current registered ag tment of State: (If resigned, enter resigned			
	Drew T. Melville			
	515 E Las Olas Boulevard, Suite 120			
	Fort Lauderdale/Florida 33301	<u> </u>		
6. The name and (if changed):	street address of the new registered agen	t (if changed) and /or registered office	2016 FEB 17	
	101 NE 3rd Avenue, Suite 1500			
	P.O. Box NOT acceptable Fort Lauderdale, Florida 33301			
The street addre	•	address of the business office of its registered		
		by its board of directors or by an officer so ified in writing of the change.		
	Digitally agreed by Conse Methole Ville Dir. Ch & Fore Methole and a foremental agreed Color C = U.S. C & Done Methole PA Diet = 2016 02 06 22 12 56 05000' Te of an officer or director	Drew T. Melville, President Printed or typed name and title		
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac is document is being filed merely to refle that the corporation has been notified in		red !	
Drew Me	Optically appred by O'rew Metylle ON CN = O'rew Metylle email = drewmetylle@gmail com C = US O = Drew Metylle, PA Date 2016 02 05 22:13.12-0500*	2/5/2016		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
	elville, President gped 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 * * *