

P15000093117

(Requestor's Name)

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(Business Entity Name)

(Document Number)

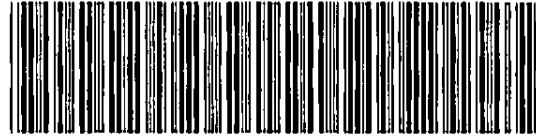
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5.9.18

Lisa Williams  
Advised to make  
All corrections  
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2018 MAY -7 PM 1:26

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Lisa Joyce Williams, PA  
Name of Corporation

**DOCUMENT NUMBER:** P15000093117

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:

Lisa Williams  
Name of Contact Person

Lisa Joyce Williams, PA  
Firm/Company

6993 Edgeworth Drive  
Address

Orlando, FL 32819  
City/State and Zip Code

Florida@lisawrealtor.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Williams at ( 407.247.1567 )  
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

# 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 USA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lisa Joyce Williams, PA
2. The principal office address: 6993 EDGEWORTH DRIVE, ORLANDO, FL 32819
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 11/13/2015 Document number: P15000093117
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)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FL 32301

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

Lisa Joyce Williams

6993 EDGEWORTH DRIVE

P.O. Box NOT acceptable

ORLANDO, FL 32819

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.

Lisa Williams

dotloop verified  
05/02/18 12:58PM EDT  
DV6 5R5D W9YW LNT0

Signature of an officer or director

Lisa Williams PRESIDENT

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.

Corporation Service Company

By:

Lisa Williams

dotloop verified  
05/02/18 12:58PM EDT  
XHX1-1RA1 4HOS-12/18

Signature of Registered Agent

05/02/2018

Date

If signing on behalf of an entity:

LISA WILLIAMS, PRESIDENT

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314