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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT. Cynthia Ann McGuire, P.A.

Name of Corporation

DOCUMENT NUMBER:

P16000003802

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:

Cynthia McGuire

Name of Contact Person

Cynthia Ann McGuire, P.A.

Firm/Company

612 NW 7th Ct

Address

Boynton Beach, FL 33426

City/State and Zip Code

CynthiaMcGuireRealtor@gmail.com

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

For further information concerning this matter, please call:

Cynthia McGuire

,561

542-2262

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

statement of ch	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.150 hange is submitted for a corporation organized under the laws of t der to change its registered office or registered agent, or both, in t	the State of Florida	<u></u>	*
1. The name of	f the corporation: Cynthia Ann McGuire, P.A. al office address: 612 NW 7th Ct, Boynton Beach, FL			
	g address (if different):			
4. Date of incor	orporation/qualification: 01/11/2016 Document number	P1600000380)2	
5. The name an	nd street address of the current registered agent and registered officartment of State: (If resigned, enter resigned)	ce on file with the		
	CORPORATION SERVICE COMPANY			
	1201 HAYS STREET			
	TALLAHASSEE, FL 32301			<u>_</u>
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or re	egistered office	2016 JUN 27	VISION OF
	Cynthia Ann McGuire			RON ROLL
	612 NW 7th Ct, Boynton Beach, FL 33426		PH 2	F 5 19
	P.O. Box NOT acceptable		2: 52	
-	ress of its registered office and the street address of the business ll be identical.		l agei	n t,
Such change wanthorized by t	was authorized by resolution duly adopted by its board of director the board, or the corporation has been notified in writing of the corporation has been notified in writing of the corporation.	rs or by an officer so change.		
	Cynthia Ann Mo	Guire		-
I hereby accept I further agree performance of agent. Or, if th	of the appointment as registered agent and agree to act in this case to comply with the provisions of all statutes relative to the propof my duties, and I am familiar with and accept the obligation of this document is being filed merely to reflect a change in the reging that the corporation has been notified in writing of this change	ipacity. Per and complete my position as register islered office address.	red I	
C, XM	6/21/2016			
	pehalf of an entity:	ate		
Т	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 CR2E045 (03/12)