P14000021381

(Re	equestor's Name)	
(Ãd	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DIANE E GRAY PA Name of Corporation
DOCUMENT NUMBER: <u>\$ 16000021381</u>
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:
DIANE ERRY Name of Contact Person
DIANE E GRAY PA Firm/Company
19934 SCRIMSHAW WAY
TEOUESTA FL 33469 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (561) 262-1400 Name of Contact Person Area Code & Daytime Telephone Number
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 Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DIANK E GRAY PA
2. The principal office address: 19274 Jeanson war
TEQUESTR FL 33469
3. The mailing address (if different): $\sim 1/4$
4. Date of incorporation/qualification: 83/04/16 Document number: P16000021381
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)
LORFORATION SURVICE COMPRAY
1201 HAYS STREET
TALZAHASGEE, FL 32301 2 [7]
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DIANE E ERRY
19934 SCRIMENAW WAY P.O. Box NOT acceptable TECVESTA, FL 33469
TECVESTA, FL 33469
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.
Signature of an officer or director DIANGE GRAY 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
NA
Typed or Printed Name

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