Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000236423 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

	_					
Emai	1.	Adı	dr	es	s	:

REGISTERED AGENT CHANGE FLORIDA ENTREPRENEUR LAW, P.A.

r	
Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO:

Amendment Section Division of Corporations

15129570210

SURJECT: FLORIDA ENTREPRENEUR LAW, P.A.

Name of Corporation

DOCUMENT NUMBER: P16000046937

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:

Margot Mullin

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

orders@rasi.com

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

For further information concerning this matter, please call:

Margot Mullin

",888 _\705-7274

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

15129570210

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

Pursuant to the provisions of sections 607.0502, 617.0; statement of change is submitted for a corporation orginized in order to change its registered office or regis	anized under the laws of the State of	Florida	_
1. The name of the corporation: FLORIDA EN	·		
2. The principal office address: 101 NE 3RD A	AVE, STE. 1500		
3. The mailing address (if different):			
4. Date of incorporation/qualification: 05/26/201	16 Document number: P160	00004693	7
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)		vith the	
CORPORATE CREATI	ONS NETWORK INC.	_	
11380 PROSPERTY F	ARMS ROAD #221 E		
PALM BEACH GARDE	ENS, FL 33410	TAS _	
6. The name and street address of the new registered ag (if changed):		19 AUG -8	F
Registered Agent Solu		111-	Ш
155 Office Plaza Dr., S	Suite A or acceptable	AH IO: OF STA	D
Tallahassee, FL 3230		RDA FOS	
The street address of its registered office and the stree as changed will be identical.	et address of the business office of i	ts registered ag	ent.
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been n	ed by its board of directors or by an otified in writing of the change.	officer so	
/S/ Michelle K. Suasey Signature of an other or director	Michelle K. Suarez		_
I hereby accept the appointment as registered agent a I further agree to comply with the provisions of all sta performance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to re hereby confirm that the corporation has been notified	nd agree to uct in this capacity. Itutes relative to the proper and con accept the obligation of my position flect a change in the registered office in writing of this change.	nplete n as registered ce address, I	
Mockensia H	08/07/2019		_
If signing on behalf of an entity:	2-11		
Mackenzie Hart - Assistant Secretary			

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

Typed or Printed Name