

P16000049688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

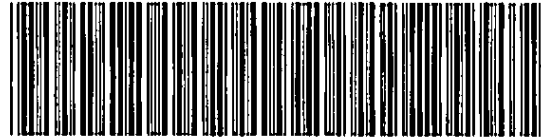
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August 3, 2022

Via U.S. Mail

Amendment Section

Florida Department of State Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

RE: Amendment Section – Registered Agent Form
Robert J. Kurzreiter, P.A.

To whom it may concern:

Please find enclosed the Statement of Change of Registered Office or Registered Agent or Both for Corporations and check number 6035 in the amount of \$35.00 for the fees to be paid for changing the address of the registered agent.

Sincerely,



Robert W. Anthony

RWA/mrf

Enc.

Cc: Rob Kurzreiter

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROBERT J. KURZREITER, P.A.
Name of Corporation

DOCUMENT NUMBER: P16000049688

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:

ROBERT J. KURZREITER

Name of Contact Person

ROBERT J. KURZREITER, P.A.

Firm/Company

1223 Edgewater Dr.,

Address

Orlando FL 32804

City/State and Zip Code

rob@homesbyrobk.com

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

For further information concerning this matter, please call:

Robert J Kurzreiter

Name of Contact Person

at (407) 476 4156

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: ROBERT J. KURZREITER, P.A.

2. The principal office address: 1223 Edgewater Dr., Orlando FL 32804

3. The mailing address (if different): _____

4. Date of incorporation/qualification: June 6, 2016 Document number: P16000049688

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)

ROBERT J. KURZREITER

708 East Colonial Drive, Suite 200

Orlando, Florida 32803

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

ROBERT J. KURZREITER

1223 Edgewater Dr., Orlando FL 32804

P.O. Box NOT acceptable

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

ROBERT J. KURZREITER

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

8/2/2022

Date

If signing on behalf of an entity:

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 (04/13)