P16000060367

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Lukacs Law Firm, P.A.

Name of Corporation

DOCUMENT NUMBER: P16000060367

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:

John C. Lukacs Jr.

Name of Contact Person

Lukacs Law Firm, P.A.

Firm/Company

2 Alhambra Plaza Suite 620

Address

Coral Gables, Florida 33134

City/State and Zip Code

jl@rlinjurylawyers.com

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

For further information concerning this matter, please call:

John C. Lukacs Jr.

Name of Contact Person

Area Code & Daytime Telephone Number

BIII POR -2

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 cha	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes n organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Lukacs Law I	Firm, P.A.	
		Plaza, Suite 620, Coral Gables, FL 33	3134
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 07/13/16	Document number: P16000060	367
	d street address of the current regis rtment of State: (If resigned, enter	tered agent and registered office on file with the resigned)	
	John C. Lukacs Jr.		
	2100 Ponce De Leon Bl	vd. Suite 1180	
	Coral Gables, FL 33134		
6. The name and (if changed):	d street address of the new register	ed agent (if changed) and /or registered office	2011 APR -2
	John C. Lukacs Jr.		
	2 Alhambra Plaza, Suite	620	
		lox NOT acceptable	
	Coral Gables, FL 33134		
The street addre as changed will	ess of its registered office and the be identical.	street address of the business office of its registe	ered agent,
		dopted by its board of directors or by an officer seen notified in writing of the change.	80
1	re of an officer or director	John C. Lukacs Jr. Printed or typed name and title	
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as regi to reflect a change in the registered office addre	stered ss, I
		March 27, 2018	
Sigi	nature of Registered Agent	Date	
	half of an entity:		
John C. Lul	-		
13	yped or Printed Name		

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