

P16000082102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

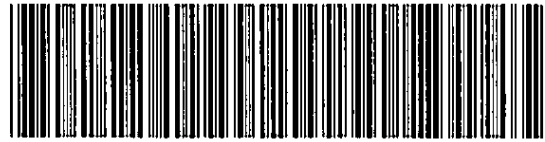
(Business Entity Name)

(Document Number)

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A. Butler
7/2/21

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Keith L. Hammond, P.A.
Name of Corporation

DOCUMENT NUMBER: P16000082102

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:

Keith L. Hammond

Name of Contact Person

Keith L. Hammond, P.A.

Firm/Company

P.O. Box 470361

Address

Celebration, FL 34747

City/State and Zip Code

keith@hammondlawcenter.com

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

For further information concerning this matter, please call:

Keith L. Hammond

Name of Contact Person

at (407) 730-9909

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: Keith L. Hammond, P.A.
 2. The principal office address: 700 Celebration Avenue, Suite 210, Celebration, FL 34747
 3. The mailing address (if different): P.O. Box 470361, Celebration, FL 34747-0361
 4. Date of incorporation/qualification: 10/10/2016 Document number: P16000082102
 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)

Keith L. Hammond
1601 W. Colonial Drive
Orlando, FL 32804

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Keith L. Hammond
700 Celebration Avenue, Suite 210
Celebration, FL 34747
P.O. Box NOT acceptable

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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

Keith L. Hammond, President
 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

June 25, 2021
 Date

If signing on behalf of an entity:
Keith L. Hammond
 Typed or Printed Name

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