P16000100069

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SECHETARY OF STATE
SITURGE OF CORPORATIONS
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COVER LETTER

TO:	Amendment Section Division of Corporation:
	151 (15) of or corporation

SUBJECT: Lake Jesup Animal Hospital, P.A. Name of Corporation	
DOCUMENT NUMBER: P16000100069	
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:	
Ashley C. Winship, LL.M.	
Name of Contact Person	
Winship Law, P.A. Firm/Company 280 W. Canton Avenue, Suite 230	
Address	: ~ , ,
Winter Park, FL 32789	50
City/State and Zip Code	五年 ひばし
E-mail address: (to be used for future annual report notification)	CORPORA
For further information concerning this matter, please call:	TEMORS
Ashley C. Winship at (407) 636-5620 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

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

1. The name of the corporation: Lake Jesup Animal Hospital, P.A. 2. The principal office address: 190 Tuskawilla Road Winter Springs, FL 32708 3. The mailing address (if different):	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.
Winter Springs, FL 32708 3. The mailing address (if different): 4. Date of incorporation/qualitication: 01/01/17 Document number: P16000100069 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) Ashley C. Winship / Winship Law, P.A. 230 S. New York Ave. Suite 200 Winter Park, FL 32789 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Ashley C. Winship / Winship Law, P.A. 280 W. Canton Ave. Suite 230 PO. Box NOT exceptable Winter Park, FL 32789 The street address of its registered office and the street address of the business office of its registered agent. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, for the corporation has been notified in writing of the change. **The street address of its registered agent and agree to act in this capacity. The proper made and once the complete proformance of my datics, and I am Jamiliar 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. **Bull Date Date Date Date Date Date Date Date	1. The name of the corporation: Lake Jesup Animal Hospital, P.A.
3. The mailing address (if different): 4. Date of incorporation/qualification: ———————————————————————————————————	2. The principal office address: 190 Tuskawilla Road
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Winter Park, FL 32789 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Ashley C. Winship / Winship Law, P.A. CC 7787	Ashley C. Winship / Winship Law, P.A.
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If signing on behalf of an entity:	Signature of Registered Agent Date
Turned or Bristad Numa	
typed of Filmed Name	Typed or Printed Name

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