

P17000046599

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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(Document Number)				
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10/26/20--01030--013 **35.00

2020 OCT 26 PM 1: 41 SECRETARY OF STATE

12/5/20





TO: Amendment Section Division of Corporations

SUBJECT: Kristin E. Blanculli, P.A. Name of Corporation	
·	
DOCUMENT NUMBER: P17000046899	
The enclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Kristin Bianculli	
Name of Contact Person	
Kristin E. Bianculli, PA	
Firm/Company	
416 NE 13th Ave	
Address	
Fort Lauderdale, FL 33301	
City/State and Zip Code	
keb@biancullilaw.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	e call:
Kristin Bianculli	at (609)410-7400 Area Code & Daytime Telephone Numb
Name of Contact Person	Area Code & Daytime Telephone Numb

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

CR2E045 (04/13)

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

statement of cha	inge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Si on organized under the laws of the State of $\frac{F}{2}$ or registered agent, or both, in the State of FI	lorida	
1. The name of	the corporation: Kristin E. Biancu	illi, P.A.		
2. The principal	office address: 416 NE 13th Ave.	, Ft. Lauderdale, FL 33301		
3. The mailing a	iddress (if different):			
4. Date of incor	e of incorporation/qualification: 5/25/2017 Document number: P17000046899			
	I street address of the current regition of State: (If resigned, enter	istered agent and registered office on file with r resigned)	h the	
	Kristin E. Bianculli		2020 SE(
	275 N Federal Highway, No. 602		2020 OCT 26 SECRETAR SALIAN	
	Pompano Beach, FL 33062		//	
6. The name and (if changed):	I street address of the new registe	red agent (if changed) and /or registered offi	rojin 🍱 🚌	
	Kristin E. Bianculli			
	416 NE 13th Ave			
	Fort Lauderdale, FL 33301	P.O. Box NOT acceptable		
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its	registered agent,	
Such change wauthorized by t	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an obeen notified in writing of the change.	officer so	
X	Poi	Kristin E. Bianculli, President		
Signati	re than officer or director	Printed or typed name and till	e	
I further agree of my duties, ar document is be	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a chan s been notified in writing of this	igent and agree to act in this capacity. All statutes relative to the proper and comp the obligation of my position as registered uge in the registered office address, I hereby change.	plete performanc ' agent. 'Or, if thi, y confirm that the	
χ_{-}		10/20/2020		
Sip	mature of Registered Agent	Date		
If signing on be	chalf of an entity:			
Kristin E. Biance	elli			
1	yped or Printed Name	_		

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