## P17000078374

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
D DIOK UD D WAIT D MAII				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Codified Contract Codification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
JORNE				
J. HORNE				
JUL 10 2024				
<u>-</u>				





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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: The Law Offices of Prosper Shaked P. of Corporation	A.
DOCU	JMENT NUMBER: P17000078374	
The er	nclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
Prospe	r Shaked	
Name	of Contact Person	——————————————————————————————————————
The La	w Offices of Prosper Shaked P.A.	
Firm/C	Company	
15520	W Dixie Hwy	
Addre	SS	
North	Miami Beach, FL 33162	
City/S	tate and Zip Code	<del></del>
	prosper@prosperlaw.com	
E-mai	l address: (to be used for future annua	l report notification)
		•
For fu	rther information concerning this matter,	please call:
Prospe	r Shaked	305 249-1635
	Name of Contact Person	at ( 305 ) 249-1635 Area Code & Daytime Telephone Number
Enclos	sed is a \$35,00 check made payable to the	
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of ch	nnge is submitted for a corporation or	.0302, 607.1308, or 617.1308, Florida Statues rganized under the laws of the State of <mark>Florida</mark> gistered agent, or both, in the State of Florida.		
	the corporation: The Law Offices of P			
2. The principal	office address: 15520 W Dixie Hwy N	Jorth Miami Beach, Fl. 33162		
3. The mailing a	address (if different):			
=	·	Document number: P17000078374+		
5. The name an		ed agent and registered office on file with the		
	Prosper Shaked			
	14 NE 1st Ave #706			
	Miami, FL 33132			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Prosper Shaked		202415.	
	15520 W Dixie Hwy		Ç.,	
	P.O. Box NOT acceptable			
	North Miami Beach, FL 33162		.? r⇒	
The street addr	ess of its registered office and the str l be identical.	reet address of the business office of its regis	ت. tered agent,	
Such change wauthorized by t	as authorized by resolution duly ado he board or the corporation has been	pted by its board of directors or by an officer n notified in writing of the change.	· so	
		Prosper Shaked		
Signat.	ire of an officer or director	Printed or typed name and title		
l further agrée of my dutiès, ar document is he	nd I am familiar with and accept the	statutes relative to the proper and complete p obligation of my position as registered agen in the registered office address, I hereby conf	t. Or. if this	
- King	gnature of Registered Agent	Date		
If signing on bo	chalf of an entity:			
The Law Office:	s of Prosper Shaked P.A.			
T.	yped 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)