## P170000 95457

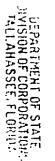
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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: LAWHOUSE, ATTORNEYS AT LAW, P.A.	
Name of Corporation	
DOCUMENT NUMBER: P17000095457	
DOCUMENT NUMBER:	
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
C. RANDALL AUSTIN	
Name of Contact Person	
LAWHOUSE, ATTORNEYS AT LAW, P.A.	
Firm/Company	<del></del>
720 GOODLETTE RD. N.	
Address	····
NAPLES, FL 34102	
City/State and Zip Code	
RANDALL@ATTORNEYSHAPIR	O.COM
E-mail address: (to be used for future annual report	rt notification)
For further information concerning this matter, please	call:
C. RANDALL AUSTIN	at (954 \\2058360
Name of Contact Person	at (954 )2058360 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depar	tment of State.
Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations	Amendment Section
P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.05 inge is submitted for a corporation orga is to obougn its requirement of	nized under the laws of the State of	FLORIDA
	r to change its registered office or regis	•	Florida.
	the corporation: LAWHOUSE, ATTORN		
2. The principal	office address: 720 GOODLETTE RD. N	. NAPLES, FLORIDA 34102	<del> </del>
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 01/01/2018	Document number: P1700009	95457
5. The name and Florida Depar	I street address of the current registered a treet of State: (If resigned, enter resign	agent and registered office on file weed)	ith the
	C. RANDALL AUSTIN		
	1100 S. FEDERAL HIGHWAY		 د
	DEERFIELD BEACH, FL 33441		12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6. The name and (if changed):	street address of the new registered age	ent (if changed) and /or registered of	SSCA
	C. RANDALL AUSTIN		三 一
	720 GOODLETTE RD. N.		STATE STATE CORNE
	P.O. Bo	NOT acceptable	- ,,,,,,
	NAPLES, FLORIDA 34102		_
The street addre as changed will	ss of its registered office and the street be identical.	address of the business office of it	s registered agent,
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been no	d by its board of directors or by an stiffed in writing of the change.	officer so
C. Kand Signatur	e of an officer or director	C. RANDALL AUSTIN, PRES.  Printed or typed name and til	
l hereby accept i I further agree to of my duties, and document is beir corporation has	the appointment as registered agent an o comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change	d agree to act in this capacity. utes relative to the proper and com igation of my position as registered te registered office address, I hereb	aplete performance d agent. Or, if this by confirm that the
C. San	dall austin	01/03/20 <b>2</b>	
- sign	aute of Registered Agent	Date	
lf signing on bel	nalf of an entity:		
Ту	ped or Printed Name		

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