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COVER LETTER

TO: Amendment Section Division of Corporations The Law Offices of Sara J. Singer, P.A. Name of Corporation P18000075551 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: Sara Singer Name of Contact Person The Law Offices of Sara J. Singer, P.A. Firm/Company 1937 E. Atlantic Blvd, Suite 205 Address Pompano Beach, FL 33062 City/State and Zip Code 4 @ Sary Singus aw Com
address: (to be used for future annual report notification) For further information concerning this matter, please call: Sara Singer Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address:

Amendment Section
Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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

statement of char	provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: The Law Offices of Sara J. Singer, P.A.	
2. The principal	office address: 1937 E. Atlantic Blvd, Suite 205, Pompano Beach, FL 33062	
<u></u>		
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 9/5/2018 Document number: P18000075551	
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
	Sara Singer, 2301 NE 11th Avenue, Wilton Manors	
	2301 NE 11th Avenue	
	Wilton Manors, FL 33305 EC 26	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	Sara Singer	
	1937 E. Atlantic Blvd, Suite 205	
	P.O. Box NOT acceptable Pompano Beach, FL 33062	
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa	s authorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change.	
	re of an officer or director Printed or typed name and title	
I hereby adcept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered states document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
/ W	half of an entity:	
ir signing on bei	man or an entry.	
Ty	ped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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