

P19000018623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

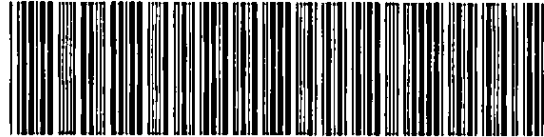
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C. GOLDEN

APR 13 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: change of registered agent

Name of Corporation

DOCUMENT NUMBER: P19000018623

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:

Jacob Cukjati

Name of Contact Person

Jacob Cukjati CPA

Firm/Company

5780 Avenida Robledal

Address

Pensacola, Florida 32504

City/State and Zip Code

cpachartered@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacob Cukjati

Name of Contact Person

at (850) 384-3009

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

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.

1. The name of the corporation: ACCESS TO CARE P.A.
2. The principal office address: 4603 N MOOR COURT
PENSACOLA, FL 32503
3. The mailing address (if different): _____

4. Date of incorporation/qualification: March 1 2019 Document number: P19000018623

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)

LATOYA M JACKSON
4603 N MOOR COURT
PENSACOLA, FLORIDA 32503

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LATOYA M WALLACE
4603 N MOOR COURT
P.O. Box NOT acceptable
PENSACOLA, FL 32503

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

LATOYA M WALLACE, President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I am familiar 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.


Signature of Registered Agent

April 3, 2019
Date

If signing on behalf of an entity:

Typed 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 (03/12)

2019 APR -8 PM 12:08

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