P190000 41103

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TO:

Amendment Section Division of Corporations

SUBJECT: Law Office of Jeanette Mora, P.A. Name of Corporation	
DOCUMENT NUMBER: P19000041103	· · · · · · · · · · · · · · · · · · ·
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:
Jeanette mora	
Name of Contact Person	-
Law Office of Jeanette Mora, P.A.	
Firm/Company	
15 S. Orlando Ave.	
Address	
Kissimmee, FL 34741	
City/State and Zip Code	
jeanette@mora-law.com	
E-mail address: (to be used for future annual repo	nt notification)
For further information concerning this matter, please	call:
Jeanette Mora	at (407 \ \)734-0680
Name of Contact Person	at (407) 734-0680 Area Code & Daytime Telephone Number
Enclosed is a \$35,00 check made payable to the Depart	rtment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	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 change is submitted for	ons 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this or a corporation organized under the laws of the State of Florida	
	istered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: $\frac{1}{2}$	iw Office of Jeanette Mora	
2. The principal office address: 15 S. Orlando Ave., Kissimmee, FL 34741		
3. The mailing address (if different	t): P.O. Box 421402, Kissimmee, FL 34742-1402	
4. Date of incorporation/qualificati	ion: 5/13/2019 Document number: P19000041103	
	the current registered agent and registered office on file with the	
Mora, Jeanette		
3211 Vineland Rd	., Suite 301	
Kissimmee, FL 34	746	
6. The name and street address of t (if changed):	the new registered agent (if changed) and /or registered office	
Mora, Jeanette		
15 S. Orlando Ave	·.	
	P.O. Box NOT acceptable	
Kissimmee, FL 34	741	
The street address of its registered as changed will be identical.	d office and the street address of the business office of its registered agent.	
Such change was authorized by reauthorized by the board, or the co	esolution duly adopted by its board of directors or by an officer so orporation has been notified in writing of the change.	
Leavette II	Jeanette Mora, President Printed or typed name and title	
I hereby accept the appointment of further agree to comply with the of my duties, and I am familiar we document is being filed merely to corporation has been notified in value of Registered Age	as registered agent and agree to act in this capacity, a provisions of all statutes relative to the proper and complete performance ith and accept the obligation of my position as registered agent. Or, if this reflect a change in the registered office address, I hereby confirm that the writing of this change. [New York Properties of the change of th	
If signing on behalf of an entity:	,	
Typed or Printed Name		

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