P20 000059302

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(Document Number)	
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COVER LETTER

TO:	: Amendment Section Division of Corporations	-
	Division of Corporations	•
SUBJ	BJECT: TJM Lawfirm, P.A.	
Name	ne of Corporation	
DOC	CUMENT NUMBER: P20000059302	
The er	enclosed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.
Please	se return all correspondence concerning this matter to the fo	llowing:
	J. Manos	
Name	ne of Contact Person	_
TJM L	I Lawfirm, P.A.	
Firm/0	√Company	•
16330	30 S.W. 88th Court	
Addre	ress	_
	netto Bay, FL 33157	
City/S	State and Zip Code	_
	Tmanos@tjmlawfirm.com	
E-mai	nail address: (to be used for future annual report notifical	ition)
For fu	further information concerning this matter, please call:	
Tom J.	J. Manos at (305) 341-3100 ca Code & Daytime Telephone Number
	Name of Contact Person Are	ca Code & Daytime Telephone Number
Enclos	losed is a \$35.00 check made payable to the Department of S	state
J.1010.	is a 555.00 check made payable to the Department of 5	ruic.

Street Address: Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

$^{\bullet}$ STATEMENT OF CRANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	e provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida . hange is submitted for a corporation organized under the laws of the State of <u>J</u> der to change its registered office or registered agent, or both, in the State of F	Florida		
	f the corporation: TJM Lawfirm, P.A. al office address: 16330 S.W. 88th Court Palmetto Bay, FL 33157			
3. The mailing	address (if different): Same			
4. Date of incor	prporation/qualification: 7/25/2020 Document number: P2000005	59302		
5. The name an Florida Depa	nd street address of the current registered agent and registered office on file wi artment of State: (If resigned, enter resigned)	th the		
	Desire Bravo			
	950 Brickell Bay Dr., Unit 2800	•	25	
	Miami, FL 33131		2020 SEP 14	
6. The name and street address of the new registered agent (if changed) and /or registered officif changed):				
	Tom Manos	EE, I	PH 1: 09	
	16330 S.W. 88th Court	TATE	9	
	P.O. Box NOT acceptable Palmetto Bay, FL 33157	-		
The street address changed will	ress of its registered office and the street address of the business office of it.	s regist	ered ag	gent,
Such change wa authorized by the	vas authorized by resolution duly adopted by its board of directors or by an the board, or the corporation has been notified in writing of the change.	officer	so	
Signatu	ture of an officer or director Tom J. MANOS Proper name and to	-5 id.e.s le	£_	
I hereby accept I further agree of my duties, an document is bet corporation has	of the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and common and I am familiar with and accept the obligation of my position as registered in giled merely to reflect a change in the registered office address, I herebase been notified in writing of this change.	plete p l agent. y confi	erform Or, ij rm tha	ance this t the
Sig	gnature of Registered Agent Date	<u>4/8</u>	مده د/	<u>, </u>
If signing on be	ehalf of an entity:			
	Typed or Printed Name			
	* * * CH INC CCC. \$25.00 * * *			

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
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