

P21000018929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

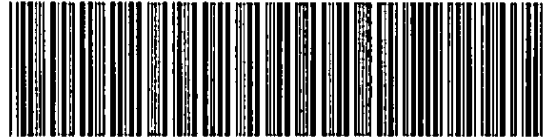
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Heather E Towe, PA - Change of Address (Principal, Mailing, Registered, Agent)  
Name of Corporation

**DOCUMENT NUMBER:** P21000018929

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:

TOWE, HEATHER E

Name of Contact Person

HEATHER E. TOWE, PA

Firm/Company

117 REINA WAY, APT 206

Address

JUPITER, FL 33458

City/State and Zip Code

heather.towe@gmail.com

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

For further information concerning this matter, please call:

Heather E Towe at (561) 8068550  
Name of Contact Person 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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303


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TALLAHASSEE, FL

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.

- TOWE, HEATHER E  
4455 MILITARY TRAIL, SUITE 100  
JUPITER, FL 33458

- TOWE, HEATHER E  
117 REINA WAY, APT 206  
JUPITER, FL 33458  
P.O. Box NOT acceptable

Such change was authorized by resolution duly authorized by the board, or the corporation has b



\_\_\_\_\_  
Signature of an officer or director

HEATHER ETOWE, PRINCIPAL  
Printed or typed name and title

Signature of Registered Agent

11-1-2022

Typed or Printed Name \_\_\_\_\_

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314