## P21000024747

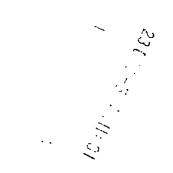
(R	equestor's Name)
(A	ddress)
(A	ddress)
(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bo	usiness Entity Name)
(De	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE
	DEC 2 8 2023

Office Use Only



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12/05.25--91007--005 \*\*05.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: JEFFREY GILBERT, Name of Corporation	P.A.
DOCUMENT NUMBER: P2100	00024747
The enclosed Statement of Chang	ge of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
Jeffrey Gilbert, President	
Name of Contact Person	<del></del>
JEFFREY GILBERT, P.A.	
Firm/Company	<del></del>
1405 North Biscayne Point Road	
Address	
Miami Beach, FL 33141	
City/State and Zip Code	
jeffreygilbert	24@gmail.com
E-mail address: (to be used for	future annual report notification)
	·
For further information concerning	ng this matter, please call:
Jeffrey Gilbert	305
Name of Contact	Person at (305 )793-7044  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made	payable to the Department of State.
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section
Division of Corpo	
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32	2314 2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cl	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of FLORIDA ler to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	f the corporation: JEFFREY GILBERT, P.A.
	al office address: 1405 North Biscayne Point Road, Miami Beach, FL 33141
3. The mailing	address (if different):
	prporation/qualification: 03/10/2021 Document number: P21000024747
5. The name at	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)
	Jeffrey Gilbert
	701 Brickell Avenue, 17th Floor
	Miami, FL 33131
6. The name ar (if changed)	nd street address of the new registered agent (if changed) and /or registered office  Jeffrey Gilbert
	P.O. Box NOT acceptable
	Miami Beach, FL 33141
The street add as changed wi	ress of its registered office and the street address of the business office of its registered agent, II be identical.
Such change value of the such change with orized by	vas 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.
	Price of an officer or director Printed or apped name and title
- Lhereby accen	of the appointment as registered agent and agree to act in this capacity.  It to comply with the provisions of all statutes relative to the proper and complete performance and lam familiar with and accept the obligation of my position as registered agent. Or, if this early filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.
	th 12/1/23
اکر) If signing on b	ignature of Registered Agent  Date  Date  Date  Date  Typed of Printed Name
JCF	frey Gilbert, P.A.
<del></del>	Typed or Printed Name

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