

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Secretary of State

1000 North G Street

Tallahassee, Florida 32304-2500

INCORPORATION

ARTICLE 6, REVISION

1995

DOCUMENT # P94000032816 (8)

MICHAEL ALAN FREEDMAN, P.A.

7811 S. WOODRIDGE DR.
PARKLAND FL 33067

7811 S. WOODRIDGE DR.
PARKLAND FL 33067

3. Date of Incorporation or Organization 3a. Date of Report
04/28/1994

4. Filing Number 65-0492647

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. The corporation has liability for unpaid taxes under the Florida Statutes ☒ No

2. Name and Address of Current Registered Agent
2a. Name and Address
2b. Name and Address
2c. Name and Address
2d. Name and Address
2e. Name and Address
2f. Name and Address
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2t. Name and Address
2u. Name and Address
2v. Name and Address
2w. Name and Address
2x. Name and Address
2y. Name and Address
2z. Name and Address

9. Name and Address of Current Registered Agent

FREEDMAN, MICHAEL A
7811 S. WOODRIDGE DR.
PARKLAND FL 33067

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Applicable)
83. City
84. State FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.01(2)(c) Florida Statutes, the above named corporation certifies the statement for the purpose of changing its registered office to the registered office in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am aware of the duties and liabilities of a registered agent under the Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
NAME FREEDMAN, MICHAEL A
STREET ADDRESS 7811 S. WOODRIDGE DR.
CITY PARKLAND FL 33067

PVST
NAME FREEDMAN, MICHAEL A
STREET ADDRESS 7811 S. WOODRIDGE DR.
CITY PARKLAND FL 33067

NAME
STREET ADDRESS
CITY

NAME
STREET ADDRESS
CITY

NAME
STREET ADDRESS
CITY

NAME
STREET ADDRESS
CITY

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME
1. STREET ADDRESS
1. CITY, STATE, ZIP

2. NAME
2. STREET ADDRESS
2. CITY, STATE, ZIP

3. NAME
3. STREET ADDRESS
3. CITY, STATE, ZIP

4. NAME
4. STREET ADDRESS
4. CITY, STATE, ZIP

5. NAME
5. STREET ADDRESS
5. CITY, STATE, ZIP

6. NAME
6. STREET ADDRESS
6. CITY, STATE, ZIP

7. NAME
7. STREET ADDRESS
7. CITY, STATE, ZIP

8. NAME
8. STREET ADDRESS
8. CITY, STATE, ZIP

9. NAME
9. STREET ADDRESS
9. CITY, STATE, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 607.01(2)(b) Florida Statutes. I further certify that the information is true and correct to the best of my knowledge and belief and that the corporation is in compliance with the provisions of the Florida Statutes relating to the filing of this document. I am aware of the duties and liabilities of a registered agent under the Florida Statutes.

SIGNATURE: Michael Freedman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

(305) 345-2063