P95000069174

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	PEARSON 2474 S.	OFFICES OF & MAYER, P.A. W. 27TH TERRACE FLORIDA 33133 Zip Phone #			Office Use	Only	
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	CORPORATION	NAME(S) & DOCUM	MENT NUM	IBER(S)	, (if known):		
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	2.	poration Name)	<u> </u>	ocument #)			
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	Limited Liability	Change of Registe	red Agent				
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	Other	Merger					-
	OTHER FILINGS Annual Report	REGISTRA QUALIFIC	ATION/	5-19- tat/ga	199 99	·	•
	Fictitious Name	Foreign					
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		Trademark					
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CR2E031(1/95)					Examiner's Initials	5	

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: <u>Pearson</u> and Mayer, P. A.
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15. The mailing address of the corporation is: 1320 South Dixie Highway,
Suite 811, Coral Gables, FL 33146
1c. Date of incorporation: September 5, 1995 Document number: P9 5000069174
2. The name and address of the current registered agent and office:
Stephen D. Pearson
2474 SW 27 Terrace Po 0
Miami, Florida 33133 PAR &
3. The name and address of the new registered agent and office:(P.O. Box Not Acceptable)
Robert M. Mayer School & M.
Coval Gables, Florida 33146
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an office so authorized by the board.
Stayeland/ 20050 6/22/99
(Signature of an officer, chairman or /(Date)/
Stephen D. Pearson, President
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
Committed 6/29/99
(Signature of Registered Agenty) (Pate)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045(11/94)

FILING FEE: \$35.00