# P950000895/1

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C. LEWIS
DEC 3 0 2013
EXAMINER

APPROVED AND

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Anthony T. Lepore, Esq., P.A.

Name of Corporation

DOCUMENT NUMBER: P95000089511

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:

#### **Anthony Lepore**

Name of Contact Person

Firm/Company

PO Box 823662

Address

South Florida, FL 33082

City/State and Zip Code

### anthony@radiotvlaw.net

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

For further information concerning this matter, please call:

Anthony Lepore

, 954

562-4587

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Forida	
	to change its registered office or registered agent, or both, in the State of Florida.	
l. The name of t	he corporation: Anthony T. Lepore, Esq., P.A.	
2. The principal	office address: 4101 Albemarle St NW #324, Washington DC 20016	
3. The mailing a	ddress (if different): PO Box 823662, South Florida, FL 33082	
4. Date of incore	poration/qualification: 11/14/1995 Document number: P95000089511	
5. The name and	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	Anthony Lepore	
	1890 NW 139th Terrace	
	Pembroke Pines, FL 33028	
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered office	TALLA SECRE
	Kay Miles	
	10571 Santa Laguna Drive	1338 10 XX
	P.O. Box NOT acceptable	
	Boca Raton, FL 33428	
The street addr as changed will	ess of its registered office and the street address of the business office of its registered age I be identical.	miş.
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.	
Signa	Anthony Lepore Printed or typed name and title	<b>-</b> .
I hereby accept I further agree performance of agent. Or, if the hereby confirm	t the appointment as registered agent and agree to act in this capacity. Io comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
1/ an	Sanature of Registered Agent Date	· · ·
If signing on b	chaif of an entity:	
Kay Miles		
	Typed or Printed Name	

DEC 17 PH 4: 2

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TAILAHASSEE, FL 32314 CR2E045 (03/12)

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