

P96 0000 10903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

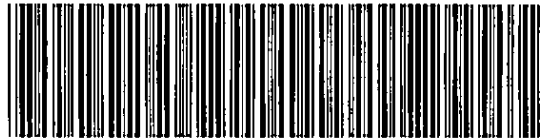
(Business Entity Name)

(Document Number)

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JAN 16 2020
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: J. Kane Counseling Center, Inc.
Name of Corporation

DOCUMENT NUMBER: P96000010903

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:

Jeffrey W. Kane
Name of Contact Person

J. Kane Counseling Center, Inc.
Firm/Company

10000 Stirling Rd, Ste 1
Address

Cooper City, FL 33024
City/State and Zip Code

drjeffreykane@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey Kane at 954, 436-1222
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

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**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, 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.

1. The name of the corporation: J. Kane Counseling Center, Inc
2. The principal office address: 10000 Stirling Rd Ste 1 (new address -
Cooper City, FL 33024 see change below
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/31/96 Document number: P 96000010903
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jeffrey W. Kane
9950 Stirling Rd Ste 108
Cooper City FL 33024

- *6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Name remains the same -
just changing
address
only

Jeffrey W. Kane
10000 Stirling Rd Ste 1~
P.O. Box NOT acceptable
Cooper City, FL 33024

old address
19 DEC 13 PM 2:10
DIVISION OF CORPORATIONS
new address

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 officer so authorized by the board, or the corporation has been notified in writing of the change.

Jeffrey W. Kane
Signature of an officer or director

Jeffrey W. Kane, President
Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Jeffrey W. Kane
Signature of Registered Agent

12/9/15
Date

If signing on behalf of an entity:

Jeffrey W. Kane
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)