

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : STEINBERG GARELLEK P.L.L.
Account Number : J20110000013
Phone : (561) 391-3344
Fax Number : (561) 948-4713

SEP 20 2016

R. WHITE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: SZG@STEINGARLAW.COM

REGISTERED AGENT CHANGE
JOSHUA F. BECKER, P.A.

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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: JOSHUA F. BECKER, P.A.
2. The principal office address: 16404 Via Venetia W, Delray Beach, FL 33484
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/09/1996 Document number: P96000075276
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)

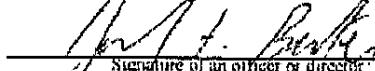
JOSHUA F. BECKER340-344 EAST DANIA BEACH BOULEVARDDANIA, FL 33004

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

SG REGISTERED AGENT LLC200 E. PALMETTO PARK ROAD, #103P.O. Box NOT acceptableBOCA RATON, FL 33432

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.


Signature of an officer or director

JOSHUA F. BECKER, PRESIDENTPrinted or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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.


Signature of Registered Agent

9/16/2016Date

If signing on behalf of an entity:

STEVEN GARELLEK, MANAGERTyped 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

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