## P97000022486

Office Use Only



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07/03/08--01020--016 \*\*35.00

Marsh Marsh

## **COVER LETTER**

| Division of Corporations  |                                       |  |  |  |
|---|---------------------------------------|--|--|--|
| SUBJECT: KANTON, DAVIDOFF & KASS, P.A.                            |                                       |  |  |  |
| (Name of Corporation  | on)                                   |  |  |  |
| DOCUMENT NUMBER: P97000022486                                     |                                       |  |  |  |
| The enclosed Statement of Change of Registered Office/Agent       | and fee are submitted for filing.     |  |  |  |
| Please return all correspondence concerning this matter to the fo | ollowing:                             |  |  |  |
|   |                                       |  |  |  |
| WILLIAM A. KASS   |                                       |  |  |  |
| (Name of Contact Per  | son)                                  |  |  |  |
|   |                                       |  |  |  |
| KANTON, DAVIDOFF & KASS, P.A. (Firm/Company)                      |                                       |  |  |  |
| (Fillin Company)  |                                       |  |  |  |
| 1200 NORTH FEDERAL HIGHW  | MAY SHITE 209                         |  |  |  |
| 1200 NORTH FEDERAL HIGHWAY, SUITE 209 (Address)                   |                                       |  |  |  |
|   |                                       |  |  |  |
| BOCA RATON, FLORIDA 33432-2845                                    |                                       |  |  |  |
| (City/State and Zip Code)   |                                       |  |  |  |
| For further information concerning this matter, please call:      |                                       |  |  |  |
| WILLIAM A. KASS at (  | 561 \ 368-1995                        |  |  |  |
| (Name of Contact Person)  | Area Code & Daytime Telephone Number) |  |  |  |
|   |                                       |  |  |  |
| Enclosed is a \$35.00 check made payable to the Department of     | State.                                |  |  |  |
|   | G                                     |  |  |  |
| Mailing Address: Amendment Section                                | Street Address: Amendment Section     |  |  |  |
| Division of Corporations  | Division of Corporations              |  |  |  |
| P.O. Box 6327   | Clifton Building                      |  |  |  |
| Tallahassee, FL 32314   | 2661 Executive Center Circle          |  |  |  |
|   | Tallahassee, FL 32301                 |  |  |  |

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

| statement of cha                       | provisions of sections 607.0502, 617.0 nge is submitted for a corporation org   | ganized under the laws of the State of   | Florida               |  |
|--|---|--|-----------------------|--|
|  | r to change its registered office or reg  | -  | Florida.              |  |
|  | he corporation: KANTOR, DAVIDO  |  |                       |  |
| 2. The principal                       | office address: 1200 NORTH FEDER  | AL HIGHWAY, SUITE 209  |                       |  |
| BOCA RATON, FLORIDA 33432-2845         |   |  |                       |  |
| 3. The mailing ac                      | ddress (if different): n/a  |  | <del></del>           |  |
| 4. Date of incorp                      | poration/qualification: 03/12/1997  | Document number: P97000  | 0022486               |  |
|  | street address of the current registered tment of State:  | d agent and registered office on file w  | ith the               |  |
|  | WILLIAM   | A. KASS  | _                     |  |
| 150 EAST PALMETTO PARK ROAD, SUITE 500 |   |  |                       |  |
|  | BOCA RATON, F   | LORIDA 33432   |                       |  |
| 6. The name and (if changed):          | street address of the new registered ag   | gent (if changed) and /or registered of  | 22                    |  |
| WILLIAM A. KASS                        |   |  |                       |  |
| 1200 NORTH FEDERAL HIGHWAY, SUITE 209  |   |  |                       |  |
|  | (P.O. Box NOT acceptal  | ,  | 1200                  |  |
|  | BUCA RATUN, F   | LORIDA 33432-2845  |                       |  |
| The street address as changed will     | ss of its registered office and the stree<br>be identical.  | et address of the business office of   | its registered agent, |  |
| Such change was<br>authorized by the   | s authorized by resolution duly adop<br>e board, or the corporation has been  | ted by its board of directors or by a<br>notified in writing of the change.  | n officer so          |  |
| _ WO                                   | e of an officer or director)  | WILLIAM A. KASS - PRESID   |                       |  |
| I hereby accept t                      | the appointment as registered agent as comply with the provisions of all stall am familiar with and accept the or gilled merely to reflect a change in been notified in writing of this chang | (Printed or typed name and agree to act in this capacity. atutes relative to the proper and cobligation of my position as register the registered office address, I here | ,                     |  |
| $_{-}$ $\mathcal{W}_{\mathcal{O}}$     | In alles  | JUNE 30, 2008  |                       |  |
|  | nature of Registered Agent)   | (Date)   |                       |  |
| If signing on beh                      | nalf of an entity:  | •  |                       |  |
| KANTON, D                              | AVIDOFF & KASS, P.A.  |  |                       |  |
| (Ty                                    | /ped or Printed Name)   |  |                       |  |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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