P97000069438

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COVER LETTER

TO:

Amendment Section Division of Corporations

Surrect. Melissa R. Sharpsteen & Associates, P.A.

Name of Corporation

DOCUMENT NUMBER

P97000069438

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Melissa R. Sharpsteen

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Melissa R. Sharpsteen & Associates, P.A.

Firm/Company

6675 38th Avenue North, Suite 102

Address

Saint Petersburg, FL 33710

City/State and Zip Code

sharpsteenlaw@gmail.com

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

For further information concerning this matter, please call:

Melissa R. Sharpsteen

,727 \804-8803

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta ange is submitted for a corporation organized under the laws of the State of Flo	orida	
	er to change its registered office or registered agent, or both, in the State of Flo	rida.	
1. The name of	the corporation: Melissa R. Sharpsteen & Associates, P.A.	<u></u>	
	office address: 6675 38th Avenue North, Suite 102 tersburg, FL 33710		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 8/1/97 Document number: P97000	069438	
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the	
	Melissa R. Sharpsteen		
,	6675 38th Avenue North, Suite 102		1
	Saint Petersburg, FL 33710	140	SECF
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offic	14 OCT 14 PM	ETARY I
	Benjamin G. DeBerg	₽	EFS
	1915 Tyrone Boulevard	2: 3g	ORIE
	P.O. Box NOT acceptable Saint Petersburg, FL 33710	•	Þ
The street addr	ess of its registered office and the street address of the business office of its reliable identical.	egistered a	gent,
Such chailge w authorized by t	as authorized by resolution duly adopted by its board of directors or by an off board, or the corporation has been notified in writing of the change.	ficer so	
Signati	Melissa R. Sharpsteen, F	residen	<u>t</u>
I further agrée	t the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and comply my duties, and I am familiar with and accept the obligation of my position a his document is being filed merely to reflect a change in the registered office to that the corporation has been notified in writing of this change.	lete is registerei address, I	d .
Sign	20 10/1/14 Date		
If signing on be	chalf of an entity:		
Benjani	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 (03/12)