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(Requ	uestor's Name)	
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(Docı	ument Number)	
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Special Instructions to Fi	ling Officer:	
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TALLAHASSEE, FLORIDI

COVER LETTER

	ent Section of Corporations	·
SUBJECT: LYN	IN BANKS P.A. (Name of Cor	poration)
DOCUMENT N	UMBER: P97000072572	
The enclosed Stat	ement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter to	the following:
	LYNN BANKS (Name of Conta	act Person)
	LYNN BANKS P.A. (Firm/Com	
	(rim/Con	ipany)
	1370 EAST TERRA MAR DRIVE (Addre	ss)
	POMPANO BEACH, FLORIDA 330 (City/State and	
For further inform	nation concerning this matter, please cal	II:
LYNN BANKS	Jame of Contact Person)	at (754) 366-9017 (Area Code & Daytime Telephone Number)
Enclosed is a \$35	.00 check made payable to the Departm	ent 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

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
1. The name of the corporation: LYNN BANKS P.A.
2. The principal office address: 1370 EAST TERRA MAR DRIVE, POMPANO BEACH, FL.33062
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 08/21/1997 Document number: P97000072572
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
LYNN BANKS
3229 EAST ATLANTIC BLVD., # 2013
POMPANO BEACH FL 33062
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LYNN BANKS
1370 EAST TERRA MAR DRIVE
(P.O. Box NOT acceptable) POMPANO BEACH, FLORIDA 33062
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.
Usignature of an officer or director) LUND BANKS (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.
(Signature of Registered Agent) (Date) (Date)
If signing on behalf of an entity:
(Wyped 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 (8/05)

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