

P9800002544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **Change of Address**

Name of Corporation

DOCUMENT NUMBER: **P98000002544**

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:

Nadine Bellows-Levine

Name of Contact Person

Bellows Associates, P.A.

Firm/Company

7890 Peters Road Suite G-102

Address

Plantation, FL 33324

City/State and Zip Code

dina@bellowscpa.com

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

For further information concerning this matter, please call:

Kristina Martella

Name of Contact Person

at **(954) 838-7000**

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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13 JUN 14 AM 11:37
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
FILE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2013

NADINE BELLOWS-LEVINE
BELLOWS ASSOCIATES, P.A.
7890 PETERS ROAD, SUITE G-102
PLANTATION, FL 33324

SUBJECT: BELLOWS ASSOCIATES, P.A.
Ref. Number: P98000002544

We have received your document for BELLOWS ASSOCIATES, P.A.. However, the document has not been filed and is being returned for the following:

The fee to file your document is \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 013A00015392

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JUN 27 AM 10:10

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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Firm/Company

7890 Peters Road Suite G-102

Address

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City/State and Zip Code

dina@bellows CPA.com

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Name of Contact Person

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Tallahassee, FL 32301

**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: Bellows Associates, P.A.
2. The principal office address: 7890 Peters Road, Suite G-102, Plantation, FL 33324
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/09/1998 Document number: P98000002544
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)

Nadine Bellows-Levine

130 S. University Drive, Suite B

Plantation, Florida 33324

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

Nadine Bellows- Levine

7890 Peters Road, Suite G-102

P.O. Box NOT acceptable

Plantation, FL 33324

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.

Nadine Bellows-Levine
Signature of an officer or director

Nadine Bellows-Levine 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.

Nadine Bellows-Levine
Signature of Registered Agent

6/12/2013

Date

If signing on behalf of an entity:

Nadine Bellows-Levine
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)

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DIVISION OF CORPORATIONS
13 JUN 28 AM 4:10