

P98000069604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

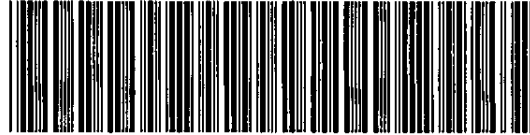
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR 27 AM 8:17

CL.
4-2-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Transcription Experts Inc.

Name of Corporation

DOCUMENT NUMBER: P98000069604

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:

Marci Bozeman

Name of Contact Person

Transcription Experts Inc.

Firm/Company

4860 NE 5 Terrace

Address

Oakland Park, FL 33334

City/State and Zip Code

marcib5@bellsouth.net

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

For further information concerning this matter, please call:

Marci Bozeman

Name of Contact Person

at (954) 701-6860

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**

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: Transcription Experts Inc.
2. The principal office address: 4860 NE 5 Terrace, Oakland Park, FL 33334
3. The mailing address (if different): Same as principal office address
4. Date of incorporation/qualification: _____ Document number: P98000069604

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)

Transcription Experts Inc. (Marci Bozeman)

800 W. Cypress Creek Road

Fort Lauderdale, FL 33309

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

Transcription Experts Inc. (Marci Bozeman)

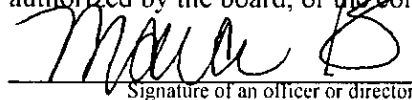
4860 NE 5 Terrace

P.O. Box NOT acceptable

Oakland Park, FL 33334

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.

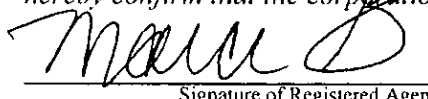


Signature of an officer or director

Marci Bozeman, CEO

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

3/24/15

Date

If signing on behalf of an entity:

Marci Bozeman

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

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