

P98000071128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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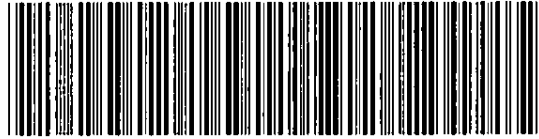
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL



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F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I200000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date: 01/13/2025

Name: Cheyenne Davis

Reference #: 2446501

Entity Name: DARRYL A. FIELD, D.D.S., P.A.

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☒ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

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STATE OF FLORIDA
TALLAHASSEE, FL

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Authorized Amount: \$35.00

Signature: *Cheyenne Davis*

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: DARRYL A. FIELD, D.D.S., P.A.

2. The principal office address: no change

3. The mailing address (if different): no change

4. Date of incorporation/qualification: 8/10/1998 Document number: P98000071128

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)

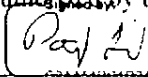
FIELD, DARRYL A
1361 13TH AVE. S., #220
JACKSONVILLE BEACH, FL 32250

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

Cogency Global Inc.
115 North Calhoun Street, Suite 4
P.O. Box NOT acceptable
Tallahassee, Florida 32301

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

Darryl A. Field, 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.

/s/ Michael Carlisle

Signature of Registered Agent

8/5/2024

Date

If signing on behalf of an entity:

Michael Carlisle, Assistant Secretary

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 (04/13)

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