## P990000000085

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(Ac	ldress)			
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SECRETARY OF STATE
SECRETARSEE. FLORID

R.A.

 $\eta$ 

OCT 2 2 2009

## **COVER LETTER**

Amendment Section

TO:

Division of Corp	orations		
SUBJECT:	Jerome Ira So		
		•	
DOCUMENT NUMBER	R:P99	000006085	
The enclosed Statement of	of Change of Registered Offic	e/Agent and fee are subm	itted for filing.
Please return all correspo	ndence concerning this matter	r to the following:	
	Jerome II Name of Co	ra Solkoff ntact Person	
	Law Office of Je		
	Firm/Co	ompany	
	9574 New Wa		
	Add	ress	
	Delray Beac City/State ar	h, FL 33446	
	City/State at	id Zip Code	
	jisolkoff@		
E-ma	il address: (to be used for f	uture annual report noti	fication)
For further information co	oncerning this matter, please o	call:	
Jerome	e Ira Solkoff	at ( 561 )	865-2961
Name of 0	Contact Person	Area Code & Dayt	865-2961 ime Telephone Number
Enclosed is a \$35.00 chec	k made payable to the Depart	ment of State.	
7 [ F	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street Address Amendment S Division of C Clifton Buildi 2661 Executiv Tallahassee, F	ection orporations ng ve Center Circle

CR2E045 (8/05)

## $\ \vec{\bullet}\$ 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, Florid Inge is submitted for a corporation organized under the laws of the State of the change its registered office or registered agent, or both, in the State of	of Florida
1. The name of t	he corporation: Jerome Ira Solkoff, P.A.	
2. The principal	office address: 9574 New Waterford Cove, Delray Beach, FL	33446
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: January 20, 1999 Document number:	P9900006085
	I street address of the current registered agent and registered office on file tment of State: (If resigned, enter resigned)	with the
	Jerome Ira Solkoff	<del></del>
	1800 W. Hillsboro Blvd., Suite 214	TAS 200
	Deerfield Beach, FL 33442	ZODS OCT 21 SECRETARY TALLAHASS
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered	21 AM 11: 13 ASSEE, FLORID
	Jerome Ira Solkoff	_ =====================================
	9574 New Waterford Cove	- 10 P
	P.O. Box NOT acceptable  Delray Beach, FL 33446	
The street addre	ess of its registered office and the street address of the business office of be identical.	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by ne board, or the corporation has been notified in writing of the change.	an officer so
King	Jerome Ira Solko Printed or typed name a	off, Owner
I further agree i of my duties, an document is hei	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 d I am familiar with and accept the obligation of my position as regist ng filed merely to reflect a change in the registered office address, I have been notified in writing of this change.	complete performance ered agent. Or, if this ereby confirm that the
Jenno	e fee Alleff 11/16/09	9
	nature of Registered Agent Date	
	half of an entity:	
	erome Ira Solkoff  yped or Printed Name	

\* \* \* FILING FEE: \$35.00 \* \* \*