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TALLAHASSLESS

COVER LETTER

TO:

TO: Amendment Section Division of Corporations		
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SUBJECT: MIchael J. Schwartz, P.A.		
Name of Corporation		
DOCUMENT NUMBER: P99000063368		
The enclosed Statement of Change of Regist	tered Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Michael J. Schwartz		
Name of Contact Person		
Michael J. Schwartz, P.A.		
Firm/Company		
2237 NW 52nd St.		
Address		
Boca Raton, FL 33469		
City/State and Zip Code		
mschwartz1313@gmail.c	com	
E-mail address: (to be used for future and	nual report notification)	
For further information concerning this matt	er, please call:	
Michael J. Schwartz	at (954)257-6242 Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to	the Department of State.	
Mailing Address:	Street Address:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statitles, this inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.
	office address: 2237 NW 52nd St. 33496
	address (if different):
	poration/qualification: 7/16/1999 Document number: P99000063368
5. The name and	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Michael J. Schwartz
	101 E. Camino Real, #504
	Boca Raton, FL 33432
6. The name and (if changed):	Michael J. Schwartz 101 E. Camino Real, #504 Boca Raton, FL 33432 Street address of the new registered agent (if changed) and /or registered office process. Michael J. Schwartz
	Michael J. Schwartz
	2237 NW 52nd St.
	P.O. Box NOT acceptable
	Boca Raton, FL 33496
	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so no board, or the corporation has been notified in writing of the change.
Lherebe accept	Michael J. Schwartz, President Printed or typed name and title Whe appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speen notified in writing of this change.
M/M	8/18/2022
1 '	nature of Redustreet Agent
II signing on bo	chalf of an entity:
 1	yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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