P99000001446

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200251830112

09/20/13--01013--016 **35.00

13 SEP 20 FM 35 AB

20 0 0 13 10 0 0 13

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Von Kantor & Associates Inc.

P99000074416

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:

Christine Von Kantor

Name of Contact Person

Von Kantor & Associates Inc.

Firm/Company

PO Box 780126

Address

Sebastian, FL 32978-0126

City/State and Zip Code

vonkantor@aol.com

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

For further information concerning this matter, please call:

Christine Von Kantor

at (772 918-8039
Area Code & Daytime Telephone Number

Name of Contact Person

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

statement of cha	inge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of Florida tistered agent, or both, in the State of Florida.
1. The name of	the corporation: Von Kantor & A	ssociates Inc.
2. The principal	office address: 463 Autumn Ter	race Sebastian FL 32958
3. The mailing a	address (if different): PO Box 780	126 Sebastian FL 32978-0126
4. Date of incor	poration/qualification: 08/20/99	Document number: P99000074416
5. The name and		ed agent and registered office on file with the gned)
	George C Von Kantor	
	706 NE 10th Avenue	
	Pompano Beach, FL 3306	0
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): George C Von Kantor 463 Autumn Terrace P.O. Box NOT acceptable Sebastian, FL 32958		
	George C Von Kantor	
	463 Autumn Terrace	
	Sebastian, FL 32958	NOT acceptable
The street address changed will	ess of its registered office and the strebe identical.	eet address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly adop ne board, or the corporation has been	ted by its board of directors or by an officer so notified in writing of the change.
Cheer	me IIm Kank	Christine Von Kantor, President
I further agree i performance of	mv duties, and I am familiar with an	••
Korall	le	09/01/13
00	nature of Registered Agent	Date
ii signing on be	half of an entity:	
	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 (03/12)

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