

P99000093364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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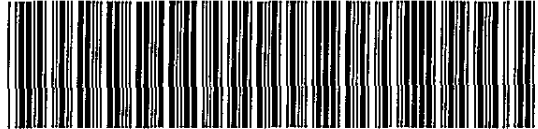
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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RA Chg.
RD

ELLIOT P. BORKSON, P.A.

1313 S. Andrews Avenue
Fort Lauderdale, FL 33316
Telephone: (954) 462-6360
Facsimile: (954) 462-5225

January 13, 2006

Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Orthopedic Specialists, P.A.
Documents No: P99000093364

To Whom It May Concern:

Enclosed is a *Statement of Change of Registered Office and Registered Agent* for Orthopedic Specialists, P.A. Also enclosed is a check in the amount of \$35.00 for the filing.

Please return all correspondence concerning this matter to the following:

Elliot P. Borkson, P.A.
1313 S. Andrews Avenue
Ft. Lauderdale, FL 33316

If you have any questions, please feel free to call me at the above number.

Sincerely yours,



Elliot P. Borkson

EPB:km

Enclosure

cc: Dr. Christopher Troiano

**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: ORTHOPEDIC SPECIALISTS, P.A.
2. The principal office address: 2951 N.W. 49th Avenue, Suite 305, Lauderdale Lakes, FL 33313
3. The mailing address (if different): same
4. Date of incorporation/qualification: October 22, 1999 Document number: P99000093364
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Timothy Monaghan, Esq.

54 N.E. Fourth Avenue

Delray Beach, FL 33483

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

Elliot P. Borkson, P.A.

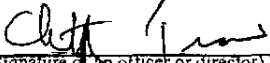
1313 S. Andrews Avenue

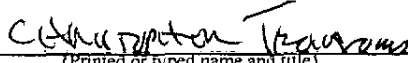
(P.O. Box NOT acceptable)

Fort Lauderdale, FL 33316

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)


(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)

1/13/06
(Date)

If signing on behalf of an entity:

Elliot P. Borkson, Esq.

(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 (8/05)

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