P99000103550

John and Sarah Spalding 1709 Palm Beach Drive Apopka, FL 32712	
City/State/Zip Phone #	

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	
(Corporation Name)	(Document #)
2	
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4.	3000032487438 -05/11/0001083009 **********************************
(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified copy \(\bar{\cappa}\)
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS PLORDE 2
Profit	Amendment *
Not for Profit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
☐ Domestication ☐ Other	☐ Dissolution/Withdrawal
U Other	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report	☐ Foreign
☐ Fictitious Name	Limited Partnership
	☐ Reinstatement
	☐ Trademark
	Other TLEWIS MAY 2 3 2000
	B. COOU

CR2E031(7/97)

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,
the undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida. 1. The name of the corporation is: SPALTING EYECARE, MA.
2. The mailing address of the corporation is: 1701 MM BEACH TR
AIGKAPL SAIR
3. Date of incorporation/qualification: 11/99 Document number: P9900103550
4. The name and address of the current registered agent and office:
CHARLES HARRISON ESS 8
14CC W FAIRBAND AVE
WINTER MARK, FUBA78-9
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
JEhn M. Spalding, OD, DRESIDENT
1709 PAIN BEACH PR.
APAKA PL 32712
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.
(Signature of an officer, chairman of the board) (Signature of an officer, chairman of the board)
John M. Shalding, of MESWENT (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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) (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

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