

S 68998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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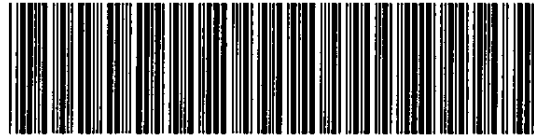
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/11/06--01055--016 **35.00

PA Change

12/13/06

DC

RICHARD J. MONESCALCHI, P.A.

Attorney at Law

Wellington Reserve Office Park - Suite 216
1035 South State Road 7
Wellington, FL 33414
Telephone: (561) 968-7877
Facsimile: (561) 968-7988

Admitted Florida Bar
Admitted New York Bar

December 7, 2006

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

Re: Richard J. Monescalchi, P.A.
Document No: SA68998
Statement of Change of Registered Agent

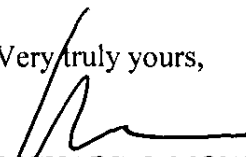
Dear Sir/Madam:

With regard to the above-referenced corporation, enclosed please find Cover Letter together with Statement of Change of Registered Office or Registered Agent or Both for Corporations.

I have also enclosed my check number 13631 in the amount of \$35.00 which represent the filing fee.

Thank you for your attention to this matter.

Very truly yours,



RICHARD J. MONESCALCHI, ESQ.

RJM/cmb
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Richard J. Monescalchi, P.A.
(Name of Corporation)

DOCUMENT NUMBER: SA68998

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:

Richard J. Monescalchi
(Name of Contact Person)

Richard J. Monescalchi, P.A.
(Firm/Company)

1035 S. State Road 7, Suite 216
(Address)

Wellington, FL 33414
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard J. Monescalchi, P.A. at (561) 968-7877
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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**

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Richard J. Monescalchi, P.A.

2. The principal office address: 1035 S. State Road 7, Suite 216
Wellington, FL 33414

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/26/1991 Document number: SA68998

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Richard J. Monescalchi

6894 Lake Worth Road, Suite 203

Lake Worth, FL 33467

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

Richard J. Monescalchi

1035 S. State Road 7, Suite 216

(P.O. Box NOT acceptable)

Wellington, FL 33414

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TALLAHASSEE, FLORIDA

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)

Richard J. Monescalchi

(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)

December 6, 2006

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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