Polli P.O. Box 1427 Kilauea, Hi. 600004644966--0 -10/19/01--01020--008 Phone # *****35.00 *****35.00 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Walk in ☐ Photocopy ☐ Will wait Certificate of Status Mail out **AMENDMENTS NEW FILINGS** ☐ Amendment Profit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** ☐ Foreign Annual Report Limited Partnership Fictitious Name Reinstatement Trademark Other

CR2E031(7/97)

10/23/01

Examiner's Initials

STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

Pursuant to the provisions of section 607.0502(3), 6 Florida Statutes, the undersigned registered agent of a c	17.0502(3), 607.1508(2), or 617.1508(2),
State of FLORIDA	
to change the registered office in Florida.	_ substitute fortowing statement in order
1. The name of the corporation: Robert P. Poll	ì, P.A.
2. The street address of the current registered office:	
lol E. Kenned	dy Blud.
Tampa, fi	33602
3. The street address of the new registered office:	-
707 N. Frank	klim St. 2 3
10th Floor	OCT
707 N. Frank 10th floor Tanga, Fl	I PM 12: 3
The corporation has been notified in writing of this chang	25 Se. 2
The street address of the registered office and the street adapent, as changed, will be identical.	Idress of the business office of the registered
Date:	
AMMARIA -	ROBERT P. Polli
(Signature of Registered Agent)	(Printed or Typed Name)

Filing Fee: \$35.00