110757

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I ALBRITTON

COVER LETTER

TO:	Amendment Section Division of Corporations					
SUBJ	Lancet, Loftus & Co.					
	Name of Corporation					
DOCI	V16757 UMENT NUMBER:					
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
	return all correspondence concerning this matter to the following:					
	Randy Goodman					
	Name of Contact Person					
	Lancet Loftus & Co.					
	Firm/Company					
2880 W. Oakland Park Blvd., Suite 226						
Address						
	Oakland Park, FL 33311					
	City/State and Zip Code					
	randyg3@bellsouth.net					
	E-mail address: (to be used for future annual report notification)					
For fu	rther information concerning this matter, please call:					
Rand	ly Goodman 954 448-2424					
	Name of Contact Person at () Area Code & Daytime Telephone Number					
Enclo	sed 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	provisions of sections 607.0502, 6 mge is submitted for a corporation r to change its registered office or	organized under the laws	s of the State o	of Florida
1. The name of	the corporation: Lancet Loftus &	Co.		
	office address: 2880 W. Oakland			
	Oakland Park, F			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 02/24/199	2 Document nu	umber: <u>V167</u>	57
	I street address of the current regist timent of State: (If resigned, enter it		office on file	with the
	Randy Goodman			
	921 SW 15 Avenue, #1			TAL
	Fort Lauderdale, FL 33312			SECRE TA
6. The name and (if changed):	I street address of the new registere			
	Randy Goodman			
	2880 W. Oakland Park Blvd.,	Suite 226		Dri .
		ox NO Γ acceptable		_
	Oakland Park, FL 33311			-
The street address changed will	ess of its registered office and the be identical.	street address of the busi	iness office of	f its registered agent,
Such change was authorized by the	as authorized by resolution duly are board, or the corporation has be	lopted by its board of dir en notified in writing of	rectors or by a the change.	in officer so
		Randy Goodma		
•	re of an officer or director		or typed name and	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not	ent and agree to act in the ll statutes relative to the and accept the obligatio to reflect a change in the ified in writing of this ch	nis capacity, proper and c on of my posit, registered of ange,	omplete ion as registered ffice address, I
(L	16	07/29/2017		
Sig	nature of Registered Agent		Date	
If signing on be	half of an entity:			
Randy Goodn				
T.	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (03/12)