## V40760

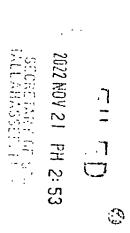
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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## COVER LETTER

TO:	Amendment Section Division of Corporations	
<b>SUBJI</b> Name (	ECT: W. Rodgers Moore, P.A. of Corporation	
DOCU	JMENT NUMBER: V40760	
The en	closed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
W. Roc	lgers Moore, Esq.	
Name	of Contact Person	
W. Roc	lgers Moore, P.A.	
Firm/C	Company	<del></del>
P.O. Bo	ox 812695	
Addres	38	<del></del>
Boca R	aton, FL 33481	
City/St	tate and Zip Code	<del></del>
	wrmoorelaw@gmail.com	
E-mai	l address: (to be used for future annua.	report notification)
For fur	ther information concerning this matter, p	please call:
W. Roc	lgers Moore	at ( <sup>561</sup> ) 394-7944  Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## . STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida : organized under the laws of the State of <u>l</u> registered agent, or both, in the State of I	Florida
1. The name of	the corporation: W. Rodgers Moore,	, P.A.	
	office address: 7777 Glades Road, S		
3. The mailing a	address (if different): P.O. Box 8126	95, Boca Raton, FL 33481	
4. Date of incor	poration qualification: 12/17/1998	Document number: V40760	
	I street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file wiresigned)	ith the
	W. Rodgers Moore, Esq.		
	1900 Glades Road, Suite 500		. 21
	Boca Raton, FL 33431		12. 13. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
6. The name and (if changed):			
	W. Rodgers Moore, Esq.		
	7777 Glades Road, Suite 100		5.52
	Boca Raton, FL 33434	P.O. Box NOT acceptable	-
The street address changed will	ess of its registered office and the	street address of the business office of it	- is registered agent,
_		dopted by its board of directors or by an een notified in writing of the change.	
	7	W. Rodgers Moore, Esq.	
Signato	e of an officer or director	Printed or typed name and ti	ile
I further agree of my duties, an document is bei	the appointment as registered age to comply with the provisions of a d l am familiar with and accept th ng filed merely to reflect a change theen notified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and con le obligation of my position as registered e in the registered office address. I herel hange	aplete performance d agent. Or, if this by confirm that the
	7	11/15/22	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Т	yped or Printed Name		

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