

V69353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

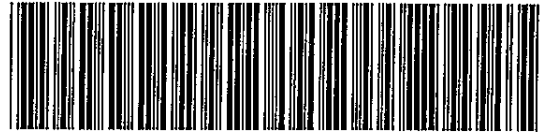
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/07/03--01019--001 **35.00

FILED
03 JUL - 1 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/7/03
RO Change
sf

LAW OFFICES

Louisa Smith Adams, P.A.

2001 BOMAR ROAD, SUITE 4
NORTH PALM BEACH, FLORIDA 33408 *closed*

TRIAL PRACTICE
PERSONAL INJURY & WRONGFUL DEATH
FAMILY LAW

TELEPHONE: 1-561-694-1020
FACSIMILE: 1-561-694-7699

June 27 2003

TO: AMENDMENT SECTION
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Fla. 32314

RE: Closing of Corporate
Office & Filing
New address for all
further mailings

Dear Personnel:

Enclosed is fee check for 35⁰⁰
And information to change the R.A. &
Corporate Addresses. Please advise
& Concur.

Thank You

Louisa Smith Adams

Total pgs (5) + ck

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LOUISA SMITH ADAM P.A.
(Name of corporation)

DOCUMENT NUMBER: V69353

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:

LOUISA SMITH ADAM
(Name of person)

LOUISA SMITH ADAM P.A.
(Name of firm/company)

11317 East Teach Rd
(Address)

Palm Beach Gardens Fla. 33410-3437
(City/state and zip code)

For further information concerning this matter, please call:

LOUISA SMITH ADAM at (561) 691-0306
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

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

1. The name of the corporation: LOUISA SMITH ADAM P.A.
2. The ^{current + NEW} principal office address: 11317 EAST TEACH ROAD
Palm Beach Gardens, FL 33410-3437
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/1/92 Document number: V69353

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

LOUISA SMITH ADAM
2001 BOMAR RD #4
NORTH Palm Beach, FL 33408

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

LOUISA SMITH ADAM (unchanged)
11317 East Teach Road
(P.O. Box or personal mailbox NOT acceptable)
Palm Beach Gardens, FL 33410-3437

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] President LOUISA SMITH ADAM
(Signature of an officer, chairman or vice chairman of the board) (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] June 26 2003
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

[Signature] President Owner
(Typed or Printed Name) (Capacity)

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

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

FILED
03 JUL - 1 AM 03:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE