

Division of Corporations

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PD1000173146

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE
HANK GRACIN, P.A.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

C. LEWIS

AUG 30 2013

EXAMINER

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: Hank Gracin, P.A.
- 2. The principal office address: 20283 State Road 7, Suite 300, Boca Raton, Florida 33498
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 12/23/2004 Document number: P04000173146
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Hank Gracin
20283 State Road 7, Suite 300
Boca Raton, Florida 33498

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

1825 N. Corporate Blvd., Suite 110
Boca Raton, Florida 33431
 P.O. Box NOT acceptable

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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 of the corporation has been notified in writing of the change.

 Signature of an officer or director

Hank Gracin, President
 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.

By: _____
 Signature of Registered Agent

August 29, 2013
 Date

If signing on behalf of an entity:

 Typed or Printed Name

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

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