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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT. Maser Consulting P.A.

Name of Corporation

DOCUMENT NUMBER: F13000001024

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:

Adriene Hayes

Name of Contact Person

Maser Consulting P.A.

Firm/Company

331 Newman Springs Road, Ste. 203

Address

Red Bank, NJ 07701

City/State and Zip Code

ahayes@maserconsulting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adriene Hayes

,,732 \383-1950

Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 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 New Jersey in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Maser Consulting P.A.	
2. The principal office address: 331 Newman Springs Road, Ste. 203, Red Bank, NJ 07	701
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/15/1985 Document number: F13000001024	
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)	
Chad Boggs	
405 North Reo Street, Ste. 105	
Tampa, FL 33609	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Northwest Registered Agent LLC	
3030 N. Rocky Point Dr, Ste 150 A	
P.O. Box NOT acceptable Tampa, FL 33607	
The street address of its registered office and the street address of the business office of its registered ager as changed will be identical.	ıt,
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.	
Senante of an affice or director  Kevin Haney, 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 arregistered agent. Or, if this document is being filed merely to reflect a change in the registered office address.	
70-EL 11116 8 5	
Signature of Registered Agent  Date  Date  If signing on behalf of an entity:	
Tom Glover Assistant Secretary	
Typed or Printed Name	

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