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(((H160001485003)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

Account Name

: URS AGENTS LLC

Account Number : I20150000127

Phone

: (800)567-4397

Fax Number

: (800)567-4398

N. VvmilE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: mmagee@bdgcpa.com

REGISTERED AGENT CHANGE

BECHER, DELLA TORRE, GITTO & COMPANY, A PROFESSIONA

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Electronic Filing Menu

Corporate Filing Menu

Help

TO:

COVER LETTER

SUBJ	BECHER, DELLA TORRE, GITTO & COMPANY, A PROFESSIONAL CORPORATION, CORP.
	Name of Corporation
DOC'	UMENT NUMBER: F16000001013
	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
	Michael F. Magee
	Name of Contact Person
	BECHER, DELLA YORRE, GITTO & COMPANY, A PROFESSIONAL CORPORATION, CORP.
	Firm/Company
	76 North Walnut Street
	Address
	Ridgewood, NJ 07450
	City/State and Zip Code
	mmagee@bdgcpa.com

Enclosed is a \$35,00 check made payable to the Department of State.

For further information concerning this matter, please call: URS Agents C/O Kanetha Bishop

Name of Contact Person

Malling 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

Area Code & Daytime Telephone Number

CR2E045 (03/12)

CR2E045 (03/12)

(((H16000148500 3)))

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 statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of	√ NJ
1. The name of the corporation: BECHER, DELLA TORRE, GITTO & COMPANY, A PROFESSION	AL CORPORATION, CORP.
2. The principal office address: 76 NORTH WALNUT ST. RIDGEWOOD, N	IJ 07450
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/02/2016	00001013
5. The name and street address of the current registered agent and registered office on file v Florida Department of State: (If resigned, enter resigned)	with the
URS AGENTS, LLC	_
1540 GLENWAY DR	
TALLAHASSEE, FL 32301	
 The name and street address of the new registered agent (if changed) and /or registered of (if changed); 	office
URS AGENTS, LLC	
3458 LAKESHORE DRIVE	=
P.O. Box NOT exceptable TALLAHASSEE, FL 32312	_ 3
The street address of its registered office and the street address of the business office of as changed will be identical.	its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an authorized by the board, or the corporation has been notified in writing of the change.	
Michael Magec, Signature of an officer or director Signature of an officer or director	Owner and partner
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 coperformance of my duttes, and I am familiar with and accept the obligation of my postitions. Or, if this document is being filed merely to reflect a change in the registered offinereby confirm that the corporation has been notified in writing of this change.	mplete m as registered
K. B - 06/17/2016	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Kanetha Bishop, Assistant Secretary 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