R0300149302

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COVER LETTER

TO:	O: Amendment Section Division of Corporations			
SUBJI	ECT:	Agile Consulting Services, Inc.		
		Name of Corporation		
DOCU	MENT NUMBER:	P03000149302		
The en	closed Statement of C	hange of Registered Office/Agent and fee are submitted for filing.		
Please	return all corresponde	nce concerning this matter to the following:		
		Mr. Antony Bishop Name of Contact Person		
Agile Consulting Services, Inc. Firm/Company				
11427 Braddock Road Address				
		Jacksonville, FL 32219 City/State and Zip Code		
Tony.Bishop1999@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
-+	Linette Bishop Name of Cor	at (904) 412-4447 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
Corporations P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of
Clifton Building
2661 Executive Center Circle

CR2E045 (03/12)

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: Agile Consulting Services, Inc.
- 2. The principal office address: 11427 Braddock Road Jacksonville, FL 32219
- 3. The mailing address (if different): N/A

Date of incorporation/qualification: <u>12/11/2003</u> Document number: <u>P03000149302</u>

4. 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)

BUSINESS FILINGS INCORPORATED

1200 South Pine Island Road

Plantation, FL 33324

5. The name and street address of the new registered agent (if changed) and /or registered office₁₁ (if changed):

Antony S. Bishop

11427 Braddock Road

Jacksonville, FL 32219

P.O. Box NOT acceptable

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.

Officer Antony Bishop

Signature of an officer or director

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity.

of my duties, and I am familiar with and accept th	l statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange.		
Signature of Registered Agent	9/6/2016 Date		
If signing on behalf of an entity:			
Typed or Printed Name	C-FFF- \$35.00 * * *		
* * * FILING FFF: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045

(03/12)