

F04000003153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500109680275

09/24/07--01017--014 \*\*35.00

FILED  
07 SEP 24 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

TS  
9/27/07

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** EMPLOYMENT MANAGEMENT PROFESSIONALS, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** F04000003153

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:

ALLEN ANDERSON  
(Name of Contact Person)

EMPLOYMENT MANAGEMENT PROFESSIONALS, INC  
(Firm/Company)

470 DOVERCOURT ROAD  
(Address)

TORONTO, ON M6H2W4 CANADA  
(City/State and Zip Code)

For further information concerning this matter, please call:

VIVIAM SCRUGGS at ( 866 ) 501-7722  
(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 PROVIDENCE OF ONTORIO in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EMPLOYMENT MANAGEMENT PROFESSIONALS, INC
2. The principal office address: 470 DOVERCOURT ROAD  
TORONTO, ON M6H2W4 CANADA
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2/23/2001 Document number: F04000003153

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

CHIP KENNEY  
2133 BROADWATER DRIVE  
JACKSONVILLE, FL 32225

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

INCORP SERVICES, INC  
17888 67th Court North  
(P.O. Box NOT acceptable)  
Loxahatchee, FL 33470

**FILED**  
**07 SEP 24 AM 11:43**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

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.

V. Scruggs  
(Signature of an officer or director)

VIVIAM SCRUGGS - MEMBER  
(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.*

V. Scruggs  
(Signature of Registered Agent)

9.18.07  
(Date)

If signing on behalf of an entity:

VIVIAM SCRUGGS  
(Typed or Printed Name)

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