F050000033444

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DIVISION OF CORPORATION

Chigo B

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

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DATE:

2/25/15

NAME:

FOXMONT CONSULTING, INC

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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 Pennsylvania in order to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of the corporation: FOXMONT CONSULTING			
2. The principal office address:	PA	15275	
3. The mailing address (if different):			
4. Date of incorporation/qualification: May 23, 2005 Document number:	F05000003244		
The name and street address of the current registered agent and registered office on file Florida Department of State: (If resigned, enter resigned)	with the		
Corporation Service Company	·		
1201 Hays Street	_	ភ	
Tallahassee, FL 32301-2525	_	FEB	
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	office	25 AM 10:	
National Corporate Research, Ltd., Inc. 155 Office Plaza Drive): 05	
P.O. Box NOT acceptable		_	
Tallahassee, FL 32301	_		
The street address of its registered office and the street address of the business office of as changed will be identical.	its register	red agent,	
Such change was authorized by resolution duly adopted by its board of directors or by a authorized by the board, or the corporation has been notified in writing of the change.			
Signature of an officer or director Tames R. M. Printed or typed name and			
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 conformance of my duties, and I am familiar with and accept the obligation of my positive agent. Or, if this document is being filed merely to reflect a change in the registered of the hereby confirm that the comporation has been notified in writing of this change.	omplete lon as regis fice addres	stered s, I	
Alen Horan 2/25/2013			
Signature of Registered Agent If signing on behalf of an entity:			

Sean Honan, Assistant Secretary

Typed or Printed Name

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