

F10000003151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

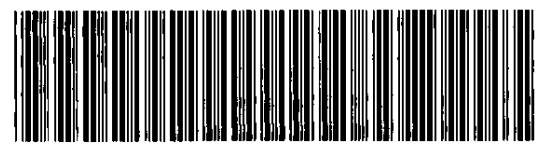
(Business Entity Name)

(Document Number)

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RA Change  
Lewis  
6-20-11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** EUREKA REVENUE, INC  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

KIM WHEATLEY  
Name of Contact Person

EUREKA REVENUE, INC  
Firm/Company

17038 EVERGREEN PLACE  
Address

CITY OF INDUSTRY, CA 91745  
City/State and Zip Code

KIM.WHEATLEY@VHACORP.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIM WHEATLEY at ( 626 ) 638-3700  
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 CALIFORNIA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EUREKA REVENUE, INC.

2. The principal office address: 17038 EVERGREEN PLACE, CITY OF INDUSTRY, CA 91745

3. The mailing address (if different): 17038 EVERGREEN PLACE, CITY OF INDUSTRY, CA 91745

4. Date of incorporation/qualification: 7/12/2010 Document number: F10000003151

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)

VINCENT HUANG

261 N.E. FIRST ST. SUITE #520

MIAMI, FL 33132

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

NRAI SERVICES, INC.

515 EAST PARK AVE.

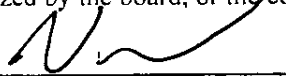
P.O. Box NOT acceptable

TALLAHASSEE, FL 32301

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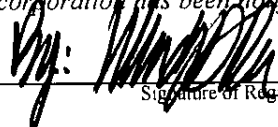
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

X   
Signature of an officer or director

VINCENT HUANG  
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.*

 NRAI Services, Inc. 6/13/2011  
Signature of Registered Agent Date

If signing on behalf of an entity:

Wendy D Rea, 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