

F100000003/51

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

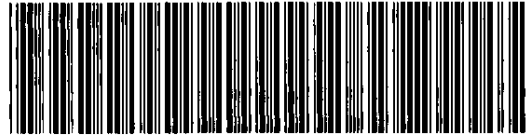
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

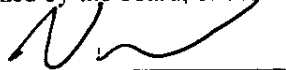
515 EAST PARK AVE.

P.O. Box NOT acceptable

TALLAHASSEE, FL 32301

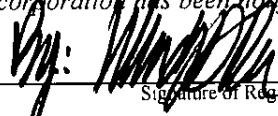
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

 NEAI 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

CR2E045 (8/05)

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