

FLS000000608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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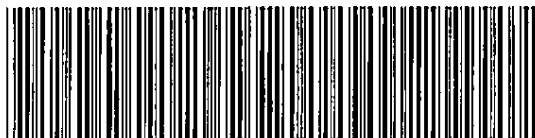
(Business Entity Name)

(Document Number)

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A. HUNT

02/13/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Consulting Engineers Group-NM, P.C.
Name of Corporation

DOCUMENT NUMBER: F1500000608

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:

Kristen Bloss

Name of Contact Person

The Consulting Engineers Group-NM, P.C.

Firm/Company

5600 Wyoming Blvd NE, Suite 205

Address

Albuquerque, NM 87109

City/State and Zip Code

registrations@ceg-nm.com

E-mail address: (to be used for future annual report notification)

2024 FEB 13 AM 8:16
STATE OF FLORIDA
TALLAHASSEE, FL
ED

For further information concerning this matter, please call:

Kristen Bloss

at (

321

) 275-0580 x 124

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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 New Mexico in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Consulting Engineers Group-NM, P.C.
2. The principal office address: 5600 Wyoming Blvd NE, Suite 205, Albuquerque, NM 87109
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/10/2015 Document number: F1500000608
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)

Christopher Ray

317 Wekiva Springs Road, Suite 200

Longwood, FL 32779

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

Paul Arthur

317 Wekiva Springs Road, Suite 200

P.O. Box NOT acceptable

Longwood, FL 32779

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.


Signature of an officer or director

Christopher Mosley, Vice President

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.


Signature of Registered Agent

01/23/2024

Date

If signing on behalf of an entity:

Paul C. Arthur

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 (04/13)