

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:			***
	Division of Co		
	Fax Number	: (850)617-6380	i_
From:			<u> </u>
	Account Name	: REGISTERED AGENT SOLUTIONS INC	j
	Account Number	: I2010 <del>0</del> 000062	in-
	Phone	: (888)705-7274	<u> </u>
	Fax Number	: (888)706-7274	
an		s for this business entity to be used for fings. Enter only one email address please.*	
Em	all Address:		-

## REGISTERED AGENT CHANGE PERSONNEL MANAGEMENT GROUP, INC.

Certificate of Status	0
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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Personnel Management Group, Inc.

Name of Corporation

DOCUMENT NUMBER

F15000003414

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:

Margot Mullin

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

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

For further information concerning this matter, please call:

Margot Mullin

at (

705-7274

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

15129570210

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi		
in orde	r to change its registered office or registe	red agent, or both, in the State of I	Iorida.
	the corporation: Personnel Man		
	office address: 7809 SOUTHTO	OWN CENTER # 102	 
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 8/3/2015	Document number: F150	00003414
	d street address of the current registered agriment of State: (If resigned, enter resigned NRAI SERVICES, IN	d)	
	1200 SOUTH PINE ISLAND ROA	AD	./.L
	PLANTATION	FL 33324	2019 HAR 25
6. The name and (if changed):	I street address of the new registered agen	t (if changed) and /or registered of	C).
	Registered Agent Solutions, I	nc.	37
	155 Office Plaza Dr., Suite A		
	Tallahassee, FL 32301	scorptable	
	ess of its registered office and the street a be identical.		
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an elified in writing of the change.	officer so
/s/ DeAnn	. Schreifels re of an other or director	DeAnn Schreifels Printed or typed name and titl	CFO
l further agree ( performance of agent. Or, if th	the appointment as registered agent and to comply with the provisions of all statumy duties, and I am familiar with and acis document is being filed merely to reflet that the corporation has been notified in	tes relative to the proper and com cept the obligation of my position ct a chance in the registered offic	plete as registered e address, l
Sign	nature of Registered Agent	03/25/2019	
·	half of an entity:		
	nell - Assistant Secretary		
T	sped or Printed Name		