

F16000002201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

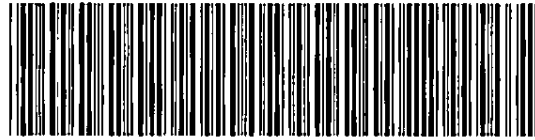
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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Office Use Only



400419521404

*Amend*

STATE OF FLORIDA  
DEPARTMENT OF REVENUE

RECEIVED  
2023 DEC -5 PM 4:31

A. RAMSEY  
DEC -6 2023

FILED  
2023 DEC -5 AM 11:24



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 12/05/2023

Name: Juliana

Reference #: 2179042

Entity Name: IEPSON CONSULTING ENTERPRISES, INC.

☐ Articles of Incorporation/Authorization to Transact Business

☒ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$35.00

Signature: Juliana Prestia

✉ CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40TH ST, 10TH FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

✉ EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES,  
REGISTRY #8010712  
6 LLOYDS AVE, UNIT 4CL  
LONDON EC3N 3AX  
+44 (0)20.3961.3080

✉ ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 1/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD. CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633  
F: +852.2682.9790

**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** IEPSON Consulting Enterprises, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F16000002201

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald R. Hoffman

\_\_\_\_\_  
Name of Contact Person

IEPSON Consulting Enterprises, Inc.

\_\_\_\_\_  
Firm/Company

11921 Rockville Pike, Suite 100

\_\_\_\_\_  
Address

Rockville, MD 20852

\_\_\_\_\_  
City/State and Zip Code

donald.hoffman@excelservices.com

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

For further information concerning this matter, please call:

Donald R. Hoffman

at ( 301 ) 984-4400

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**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

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

FI6000002201

(Document number of corporation (if known))

1. IEPSON Consulting Enterprises, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Pennsylvania

(Incorporated under laws of)

3. 05/12/2016

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Cogency Global Inc.

115 N. Calhoun Street, Suite 4

(Florida street address)

New Registered Office Address: Tallahassee

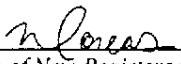
(City)

Florida 32301

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

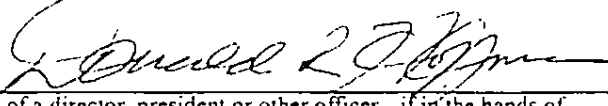
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

  
\_\_\_\_\_  
Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Donald R. Hoffman	11921 Rockville Pike, Suite 100	<input checked="" type="checkbox"/> Add
		Rockville, MD 20852	<input type="checkbox"/> Remove
Principal	Sam Veselka	2050 West Sam Houston Parkway, Suite 1550	<input checked="" type="checkbox"/> Add
		Houston, TX 77042	<input type="checkbox"/> Remove
Sr. Asso.	Ryan Lloyd	2050 West Sam Houston Parkway, Suite 1550	<input checked="" type="checkbox"/> Add
		Houston, TX 77042	<input type="checkbox"/> Remove
Pres/Sec	Kevin J. Iepson	5225 Milano St.	<input type="checkbox"/> Add
		Ave Maria, FL 34142	<input checked="" type="checkbox"/> Remove
VP/Treas	Roseanita C. Iepson	5225 Milano St.	<input type="checkbox"/> Add
		Ave Maria, FL 34142	<input checked="" type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Donald R. Hoffman  
(Typed or printed name of person signing)


Chief Executive Officer  
(Title of person signing)

FILING FEE \$35.00

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Secretary	Steven Donaldson	2050 West Sam Houston Parkway, Suite 1550	<input checked="" type="checkbox"/> Add
		Houston, TX 77042	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Donald R. Hoffman  
(Typed or printed name of person signing)

Chief Executive Officer  
(Title of person signing)

FILING FEE \$35.00

**Pennsylvania Department of State**  
Bureau of Corporations and Charitable Organizations  
PO Box 8722 | Harrisburg, PA 17105-8722  
T: 717-787-1057  
[dos.pa.gov/BusinessCharities](http://dos.pa.gov/BusinessCharities)

**TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:**

IEPSON CONSULTING ENTERPRISES, INC.

I DO HEREBY CERTIFY THAT

the foregoing and annexed is a true and correct Index Report which appear of record in this department.

I, Albert Schmidt, Secretary of the Commonwealth of Pennsylvania, do hereby certify that the foregoing and annexed is a true and correct index report which appears of record in this department.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of my office to be affixed, the day and year above written.

A handwritten signature in black ink, appearing to read "Albert Schmidt".

**Albert Schmidt**  
Secretary of the Commonwealth

Certificate No.: 026522522  
Verify this certificate online at [www.file.dos.pa.gov](http://www.file.dos.pa.gov)



**Pennsylvania Department of State**  
Bureau of Corporations and Charitable Organizations  
PO Box 8722 | Harrisburg, PA 17105-8722  
T: 717.787.1057  
[dos.pa.gov/BusinessCharities](http://dos.pa.gov/BusinessCharities)

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## Index Report

**December 05, 2023**

Examination of the indices in the Department of State on the above date show a Domestic Business Corporation entitled:

### **IEPSON CONSULTING ENTERPRISES, INC.**

Entity No.: 0001014350  
Jurisdiction: PENNSYLVANIA  
With Address At: Cogency Global Inc., 600 NORTH SECOND STREET,  
HARRISBURG, PA 17101

### **Parties on Record:**

President	DONALD R HOFFMAN	5225 MILANO ST US
Vice President	SAM VESELKA	5225 MILANO ST US
Treasurer	RYAN LLOYD	5225 MILANO ST US
Secretary	STEVEN DONALDSON	5225 MILANO ST US

### **Filing History:**

<b>Date</b>	<b>Image No.</b>	<b>Filing</b>
01/06/1988	B0550-5340	Initial Filing
11/16/2023	B0627-0698	Change of Registered Office by Entity