P.001/003

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : URS AGENTS LLC Account Number : I20150000127 : (800)567-4397 Fax Number : (800)567-4398

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: GKELM@msn.com

## REGISTERED AGENT CHANGE HADID INTERNATIONAL SERVICES - AMERICAS, LTD. CORP

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## COVER LETTER

TO: Amendment Section Division of Corporations

HADID INTERNATIONAL SERVICES - AMERICAS, LTD. CORP

Name of Corporation

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:

Gerhard Kelm

Name of Contact Person

HADID INTERNATIONAL SERVICES - AMERICAS, LTD. CORP.

Firm/Company

103 Rowell Court

Falls Church, VA 22046

City/State and Zip Code

gkelm@msn.com

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

For further information concerning this matter, please call:

URS Agents C/O Kathy Clark
Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Malling 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

CR2E045 (03/12)

CR2E045 (03/12)

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## 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, ti statement of change is submitted for a corporation organized under the laws of the State of <u>VA</u>	his
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: HADID INTERNATIONAL SERVICES - AMERICAS, L	.TD. CORP
2. The principal office address: 1000 5TH STREET, SUITE 205 MIAMI BEACH, FL	33139
3. The mailing address (if different):	
4. Date of incorporation/qualification: 07/05/2017 Document number: F1700000303	33
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)	
CATALA, RALPH R	63
1000 5TH STREET, SUITE 205	2019
MIAMI BEACH, FL 33139	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	i. c.
URS AGENTS, LLC	خ
3458 LAKESHORE DRIVE	<del>-</del>
P.O. Box NOT soceptable	
TALLAHASSEE, FL 32312	
The street address of its registered office and the street address of the business office of its register 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.    CERHARD KELM Separation of the change of the chan	cretary
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 regis agent. Or, if this document is being filed merely to reflect a change in the registered office address hereby confirm that the corporation has been notified in writing of this change.	stered s, I
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Kanetha Bishop, 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	,

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