6-18678

•			
(Re	equestor's Name)	,	
(Ad	ldress)		
. (Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
(Bu	ısiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
		,	

Office Use Only



500136847875

10/13/08--01038--082 **35.00

RA6 Ch

8 OCT 13 AM (

ED

TO:

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUB.	SJECT: Right Human Resource Consultants, Inc. (Name of Corp	Change of Principal Address and Registered Agent) oration)
DOC	CUMENT NUMBER: G18678	
The e	enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Pleas	se return all correspondence concerning this matter to	the following:
	MAUREEN A. SHEA	
	(Name of Contac	t Person)
,	Right Human Resource Consultar (Firm/Comp	
	1301 East Broward Blvd., Suite 20	
	(Vinitess	9
	Fort Lauderdale, FL 33301	
	(City/State and 2	•
For fu	further information concerning this matter, please call:	
MAU	JREEN A. SHEA (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	osed is a \$35.00 check made payable to the Departmen	at of State.
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

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

statement of ch	•	zed under the laws of the State of Florida red agent, or both, in the State of Florida.
1. The name of	the corporation: Right Human Resource C	Consultants, Inc.
2. The principa	office address: 1301 East Broward Blvd.,	Suite 200, Fort Lauderdale, FL 33301
3. The mailing	address (if different); same	
4. Date of incom	poration/qualification: 01/13/1983	Document number: G18678
	d street address of the current registered agurtment of State:	-
	MICHAEL E. GREENE	Fig. 8
	9900 W SAMPLE RD #324	90 F
	CORAL SPRINGS FL 33065	
6. The name an (if changed):	d street address of the new registered agen	t (if changed) and /or registered office
	MAUREEN A. SHEA	RIDE
	1301 East Broward Blvd., Suite	200,
	(P.O. Box NOT acceptable)	
	Fort Lauderdale, FL 33301	
The street addr as changed wil	ess of its registered office and the street a l be identical.	address of the business office of its registered agent,
Such change wathorized by t		by its board of directors or by an officer so tified in writing of the change.
(Signal	THE MES MES,	THOMAS H. SHEA, Pres.
I hereby accept I further agree of my duties, as document is be corporation ha	t the appointment as registered agent and to comply with the provisions of all statu nd I am familiar with and accept the obli ing filed merely to reflect a change in the s ocen notified in writing of this change.	l agree to act in this capacity, stes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
Marie	- the	September 19, 2008
(S	gnature of Registered Agent)	(Date)
If signing on b	chalf of an entity:	
N/A		•
	Typed or Printed Name)	•
	* * * FILING FE	E: \$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)