# N12-000007019

questor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
☐ WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
_ Certificates	of Status	
Special Instructions to Filing Officer:		
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#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

STIRLINGT. IESURF.ORG INC.

Name of Corporation

DOCUMENT NUMBER: N12000007019 (?)

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:

#### John C. Lieurance

Name of Contact Person

**IESURF.ORG INC.** 

Firm/Company

1336 McNeil Rd

Address

### Altamonte Springs FL 32714

City/State and Zip Code

iesurf.org@gmail.com

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

For further information concerning this matter, please call:

John C. Lieurance

...4U*1* 

304-6971

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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6 statement of change is submitted for a corporation organized	d under the laws of the State of Florida	
in order to change its registered office or registered	d agent, or both, in the State of Florida.	
1. The name of the corporation: IESURF.ORG INC.		
2. The principal office address: 1336 McNeil Rd Altamonte Springs FL 32714		
3. The mailing address (if different):	<b>建</b>	
4. Date of incorporation/qualification: 7/18/2012	Document number: N12000070	
5. The name and street address of the current registered ager Florida Department of State: (If resigned, enter resigned)	at and registered office on file withithe	
LEGALZOOM.COM'INC. REGIST	ERED AGENT DIVSION	
100 W BROADWAY STE 100		
GLENDALE CA 91210-1230		
6. The name and street address of the new registered agent ( (if changed):	if changed) and /or registered office	
John C. Lieurance		
1336 MCNEIL RD		
P.O. Box NOT acc		
The street address of its registered office and the street address changed will be identical.		
Such charge was authorized by resolution duly adopted by authorized by the board, of the corporation has been notific	its board of directors or by an officer so ed in writing of the change.	
Signature of an officer or director	Ohn C Lieurance PRESIDENT / FOUNDER Printed or typed name and title	
I hereby accept the appointment as registered agent and a I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and acceptagent. Or, if this document is being filed merely to reflect hereby confirm that the corporation has been notified in w	s relative to the proper and complete pt the obligation of my position as registered a change in the registered office address. I	
$\mathcal{L}_{\mathcal{A}}$	5/18/2014	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Typed or Printed Name		
* * * FILING-FEE: -\$35:00 ** *		
MAKE CHECKS PAYABLE TO FLORIE MAIL TO: DIVISION OF CORPORATIONS, P.O. CR2E045 (03/12)	DA DEPARTMENT OF STATE BOX 6327, TALLAHASSEE, FL 32314	