

PD00000060259

(Requestor's Name)

Michael A. Kramer, Esq.
Attorney and Counselor at Law
P. O. Box 181268
Casselberry, FL 32718-1268

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

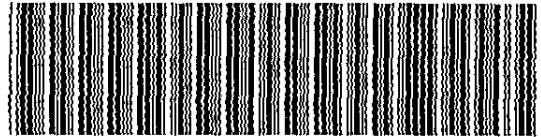
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RA/RO change
@ 1/16/03



400010020014

01/13/03--01051--003 **/0.00

FILED
03 JAN 13 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MICHAEL A. KRAMER
ATTORNEY AND COUNSELOR AT LAW
P.O. BOX 181268
CASSELBERRY, FL 32718
(407) 834-4847

January 3, 2003

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: ACCURATE SOLUTIONS, INC.
Document No. P00000060259

FILED
03 JAN 13 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed please find the following:

1. Officer/Director Resignation of Efren Rodriguez
2. Change of Registered Agent
3. Check in the amount of \$70.00 (\$35.00 Officer/Director Resignation Fee & \$35.00 Change of Registered Agent fee)

Thank you for your attention to this matter.

Very truly yours,



Michael A. Kramer, Esq.

Transmittal Resignations Accurate Solutions, Inc.

**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : ACCURATE SOLUTIONS, INC.
2. The mailing address of the corporation : 240 EAST PALMETTO AVE.
LONGWOOD, FL 32750
3. Date of incorporation/qualification: 6/16/2000 Document number: P00000060259
4. The name and address of the current registered agent and registered office:

EFREN RODRIGUEZ

571 BLACKSTONE AVE

DELTONA, FL 32725

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):

JOSEPH O'CONNOR

240 EAST PALMETTO AVE

LONGWOOD, FL 32750

The street address of its registered office and the street address of the business office of its registered agent, 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.

X [Signature]

(Signature of an officer, chairman or vice chairman of the board)

1/3/03

(Date)

JOSEPH O'CONNOR, PRESIDENT

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 registered agent.

X [Signature]

(Signature of Registered Agent)

1/3/03

(Date)

JOSEPH O'CONNOR

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***