

PO1000055894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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08 MAY 22 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Chang
6/2/08
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FACILITIES MANAGEMENT CONSULTING, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO1000055894

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:

BENJAMIN W. MEADOWS

(Name of Contact Person)

FACILITIES MANAGEMENT CONSULTING, INC

(Firm/Company)

334 BURCHETTE RD

(Address)

MANSON, NC

(City/State and Zip Code)

27553

For further information concerning this matter, please call:

BENJAMIN MEADOWS

(Name of Contact Person)

at (321) 287-4554

(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, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FACILITIES MANAGEMENT CONSULTING, INC.
2. The principal office address: 4728 SUTTON TERR.
ORLANDO, FL 32811
3. The mailing address (if different): 334 BURCHETTE RD.
MANSON, NC 27553
4. Date of incorporation/qualification: 6/1/01 Document number: P01000055094
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
BENJAMIN W. MEADOWS
4728 SUTTON TERR.
ORLANDO, FL 32811

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

ROSE P. KITCHEN
3701 S. LAKE ORLANDO PKWY, UNIT #5
(P.O. Box NOT acceptable)
ORLANDO, FL 32808

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, or the corporation has been notified in writing of the change.

Benjamin W. Meadows
(Signature of an officer or director)

BENJAMIN W. MEADOWS / PRESIDENT
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Rose P. Kitchen
(Signature of Registered Agent)

May 20, 2008
(Date)

If signing on behalf of an entity:

(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

CR2E045 (8/05)

FILED
08 MAY 22 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA