## P02000053768

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## **COVER LETTER**

Division of Corporations				
Saundare Conculting Corn				
SUBJECT: Saunders Consulting Corp.  (Name of Corporal	tion)			
DOCUMENT NUMBER: P02000053768				
The enclosed Statement of Change of Registered Office/Agen	t and fee are submitted for filing.			
Please return all correspondence concerning this matter to the	following:			
Ira Saunders				
(Name of Contact Pe	erson)			
Saunders Consulting Corp.				
(Firm/Company	)			
6985 Long Leaf Drive				
(Address)				
Dadiand Flade 22070				
Parkland, Florida 33076 (City/State and Zip Company)	Code)			
For further information concerning this matter, please call:				
For further information concerning this matter, please can:				
Ira Saunders at (	305 ) 205-5458 Area Code & Daytime Telephone Number)			
(Name of Contact Person)	Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of	f State			
Encrosed is a \$55.00 check made payable to the Department of	i State.			
Mailing Address	Stuant Adducent			
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee FL 32301			

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0502, 617.0502, ange is submitted for a corporation organiz	zed under the laws of the State of Flori	da
<del></del>	r to change its registered office or register		la.
1. The name of	the corporation: Saunders Consulting Con	p.	
2. The principal	office address: 6985 Long Leaf Drive		
Parkland, F	lorida 33076		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 5/15/2002	Document number: P0200005376	68
5. The name and	I street address of the current registered age tment of State:		
	Ira Saunders		
	5300 NW 33rd Avenue #114		
	Fort Lauderdale, Florida 33309	·	TALE SEC
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office	OCT -1
	Ira Saunders		SSEE. F
	6985 Long Leaf Drive		STA 0
	(P.O. Box NOT acceptable)		<b>Σ</b> <sup>m</sup> ω
	Parkland, Florida 33076		
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its reg	gistered agent,
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officified in writing of the change.	cer so
Jun 5	fresh (w)	Ira Saunders, President (Printed or typed name and title)	
Yhereby accept I further agree of my duties, ar	the appointment as registered agent and to comply with the provisions of all statu and I am familiar with and accept the obliving filed merely to reflect a change in the seen notified in writing of this change.	d garag to get in this capacity	e performance ent. Or, if this onfirm that the
Shac	Jamley	9/26/2007	
	grature of Registored Agent)	(Date)	
If signing on be	chalf of an entity:		
	Typed or Printed Name)	# · · _	

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