P0200055562

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cil	ty/State/Zip/Phone	→ #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

RA/RO/Change



100029455571

03/10/04--01041--005 **35.00

HAR TO PM 1: 10

LALLARY OF STAT

AHASSEE, FLORIO

FILED

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Impact Utilities Development Group, INC (Name of corporation)			
DOCUMENT NUMBER: PO 20000 55562			
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:			
Vernon williams (Name of person)			
Impact Utilities Development Group, INC			
3320 Kapot terr miramar			
(Address)			
Miramar FL 33025 (City/state and zip code)			
For further information concerning this matter, please call:			
Vernon Williams (Name of person) at (954) 392-0315 (Area code & daytime telephone number)			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address			

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

PILED

O4 MAR 10 PM 1: 10

BECKETARY OF STATE

TALLAHASSEE

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 <u>FWY (CIV</u> in order to change its registered office or registered agent, or both, in the State of Florida.	
	-
1. The name of the corporation: IMPACT UTILITIES DEVElopment GroupITA	1C.
2. The principal office address: 3320 KAPOT TERR	
Miramar FL 33025	- 4 57 - -
3. The mailing address (if different): (SAME)	
4. Date of incorporation/qualification: 5 7 2002 Document number: Po 2000 55 562	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
_ Williams VERNON	
2370 KAPOT TERR	
11 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	•
Miramar FL 33025	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): OWEN B SAMUELS.	
1429 DIRCHESTER St. Fig. 3	
On at Pupal He El 32957	
(P.O. Box or personal mailbox NOT acceptable)	
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.	
VERNON L. Williams / TEGA SURER	
(Signature of an officer or director) (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.	
2/2/11/	-
(Signature of Registered Agent) (Date)	•
If signing on behalf of an entity:	
Que 1- R. Samuels	;
(Typed or Printed Name) (Capacity)	5.4

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