

P020008133321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

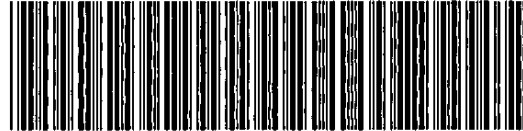
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200108812562

09/10/07--01001--025 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 SEP -7 PM 4:03

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2007 SEP -7 PM 4:08
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

R.A. Chang

C. Coulllette SEP 07 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Empirical Protective Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO2000133321

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter Graham
(Name of Person)

Empirical Protective Services, Inc.
(Name of Firm/Company)

1950 Lee Road, Suite 204
(Address)

Winter Park, FL. 32789
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Graham at (407) 599-2215
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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: Empirical Protective Services, Inc.
2. The principal office address: 1950 Lee Road, Suite 204
Winter Park, FL 32789
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/20/2002 Document number: P02000133321
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Anita Fryar - Graham
1950 Lee Road - Suite 114
Winter Park, FL 32789

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

Peter Graham
1950 Lee Road Suite 204
(P.O. Box NOT acceptable)
Winter Park, FL 32789

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.

Anita Fryar - Graham Anita Fryar - Graham
(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.

Peter Graham
(Signature of Registered Agent)

09/07/07
(Date)

If signing on behalf of an entity:

Peter Graham
(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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 SEP - 7 PM 4:03