# P0300006494

(Re	equestor's Name)	
. (Ad	ldress)	
(Ad	Idress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500242295155

12/03/12--01009--019 \*\*35.00

RAROL

SECRETARY OF STATEOUS ON VISION OF CORPORATIONS

IDEC 0 4 2017 T. FY IDEC 0 4 2012

T. ROBERTS

LAW OFFICES OF

### **DOUGLAS & QUIGLEY, P.A.**

BRANDON J. DOUGLAS ATTORNEY AT LAW 4400 NORTH FEDERAL HIGHWAY SANCTUARY TOWER ~ SUITE 200 BOCA RATON, FLORIDA 33431 TELE (561) 347-3037 FAX (561) 347-3038 DANA E. QUIGLEY ATTORNEY AT LAW

November 30, 2012

Registration Section Florida Department of State Division of Corporations P. O. BOX 6327 Tallahassee, FL 32314

In Re: Kirby Consulting Inc.
Doc. # P0300006494

#### Dear Representative:

Enclosed please find an original of Change of Registered Office/Agent for Kirby Consulting Inc. A check in the amount of \$35.00 is enclosed to cover the filing fee as well as the certified copy fee of the same. An additional copy is enclosed for your use in certifying the document and returning the same in the self-addressed, stamped envelope.

Please return the certified copy as well as all future correspondence in this matter to Brandon J. Douglas, Esq. at the address shown in the above letterhead. If you have any questions concerning this matter, please give me a call.

-,  $\langle \cdot \rangle$ 

Sincerely

Bra<del>ndon J. Doug</del>las, Eso.

BJD/llh Enclosures

#### COVER LETTER

TO: Amendment Section Division of Corporations

Kirby Consulting Inc.

Name of Corporation

P03000006494

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:

John P. Kirby

Name of Contact Person

Kirby Consulting Inc.

4400 N. Federal Hwy. Suite 200

Boca Raton, FL 33431

City/State and Zip Code

Kirbyconsulting@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John P. Kirby

Name of Contact Person

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

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Kirby Consulting Inc.
2. The principal	office address: 8243 Sawpine Road, Delray Beach, FL 33446
3. The mailing a	ddress (if different): 4400 N. Federal Hwy, Suite 200, Boca Raton, FL 33431
4. Date of incorp	poration/qualification: 01/16/2003 Document number: P0300006494
5. The name and	street address of the current registered agent and registered office on file with the treet of State: (If resigned, enter resigned)
	Frank Smith, Esq.
	9900 Stirling Road, 200A, Cooper City, FL 33024  street address of the new registered agent (if changed) and /or registered office  Brandon Douglas
6. The name and (if changed):	العند العندين ا العندين العندين العندي
	Brandon Douglas
	4400 N. Federal Hwy. suite 200, Boca Raton, FL 33431 P.O. Box NOT acceptable
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
dignatu	John P. Kirby CEO/ Director Printed or typed name and title
I hereby accept I further agree to performance of about Or if the	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the ecrporation has been notified in writing of this change.
	November 21, 2012
٠	thalf of an entity:
Brandon Do	
	yped or Printed Name

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