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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Empire Business Associates, Inc. Name of Corporation
DOCUMENT NUMBER: PO 3 000 100 557
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:
Roberta Caputo Name of Contact Person Empire Business Associates Firm/Company 1525 M 3rd St. Suite 9 Address Derfield Beach FL 33442 City/State and Zip Code Capital bound amorit com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Concerning this matter, please call: Concerning this matter, please call: at (954) 5910 - 80760 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: Empire Business Associates, Inc
2. The principal office address: 1525 NW 300 St. Swite 9 Decrfield Beach IL 33442
3. The mailing address (if different):
4. Date of incorporation/qualification: 12-17-2003 Document number: P03000100557
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
2 doerta Caputo
244 Sw pt Ave
peerfield Beach, Fl 33442
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Roberta Caputo
P.O. Box NOT acceptable
Deerfield Beaufith 33442
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.
Roberta Capato President Signature of an officer or director and officer or director of director director of director director director of director
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.
Signature of Registered Agen Bate
If signing on behalf of an entity: Obey to A Pato Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
45 (03/12)

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