P03000 103590

(Requestor's Name)				
(Address)				
(Address)				
(Marcas)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Cartification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				

Office Use Only



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Incorporating Services, Ltd.

,1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 10/20/2020

PRIORITY Routine

OUR REF # (Order ID#) 860603

ORDER ENTITY

ENGINEERING EXPRESS, INC.

	THE FOLLOWING	

ENGINEERING EXPRESS, INC. (FL)

File the attached change of agent document

NOTES:

\$35.00 Authorized

Email address for annual report reminders: speters@harborcompliance.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, October 20, 2020 Page 1 of 1

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

statement of cha	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Sta ganized under the laws of the State of Flo gistered agent, or both, in the State of Flor	orida			
	, ,	•	· uu,			
The name of the corporation: Engineering Express, Inc. The principal office address: 160 SW 12TH AVE. SUITE 106 DEERFIELD BEACH, FL 33442						
2. The principal	office address:					
~	ddress (if different):					
4. Date of incorp	poration/qualification: 09/22/2003	Document number:P03000103	5590			
5. The name and		ed agent and registered office on file with				
	BENNARDO, FRANK L					
	160 SW 12TH AVE. SUITE 106		e = 1			
	DEERFIELD BEACH, FL 33442					
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or registered office	1. 21 11: 9:37			
	Registered Agents Inc.		ب			
	7901 4th St N STE 300		ت			
	St. Petersburg FL 33702) Box NOT acceptable				
The street addre as changed will	ess of its registered office and the str be identical.	reet address of the business office of its r	egistered agent.			
Such change wa authorized by th	is authorized by resolution duly ado ne board, or the corporation has been	pted by its board of directors or by an of i notified in writing of the change.	ficer so			
		Frank L. Bennardo President				
I further agree i of my duties, an document is bei	the appointment as registered agen	statutes relative to the proper and compl obligation of my position as registered a n the registered office address. I hereby	ete performanc gent. Or, if this confirm that the			
Bee Han	nature of Registered Agent	10/20/2020				
Sign	nature of Registered Agent	Date				
If signing on be	half of an entity:					
Bill Havre						
Ty	sped 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 (04/13)