P64000032624

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(Cit	ty/State/Zip/Phone	#)
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Certified Copies	_ Certificates	of Status
Supplied Instructions to	Filing Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Investment Management and Consulting Group, Inc. Name of Corporation			
DOCUMENT NUMBER:	P0400003	2624	
The enclosed Statement of Change	of Registered Office/Agent	and fee are submitted for filing.	
Please return all correspondence co	ncerning this matter to the for	ollowing:	
•	J	•	
	Darla Hall		
	Name of Contact Per	son	
	,		
Investmer	t Management and Cor	nsulting Group, Inc.	
	Firm/Company		
4005 Ot the Park 17, Or the 1000			
	4095 State Road 7, Su Address	ille LZZZ	
	Wellington, Florida (33449	
 	Wellington, Florida 3 City/State and Zip C	ode	
	contactdarla@aol.c	rom.	
E-mail address	s: (to be used for future an	nual report notification)	
		·	
For further information concerning	this matter please call:		
1 of tartion information domastiming	manor, produce carr		
Darla Hall	at (954) 815-3339 rea Code & Daytime Telephone Number	
Name of Contact Pe	rson A	rea Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made p	ayable to the Department of	State.	
·			
<u>Mailing A</u> Amendme	ddress:	Street Address: Amendment Section	
	of Corporations	Division of Corporations	
P.O. Box		Clifton Building	
Tananass	ee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

· TO:

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 inge is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Investment Management and Consulting Group, Inc.
2. The principal	office address: 4095 State Road 7, Suite L222
	Wellington, Florida 33449
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 2-18-2004 Document number: P04000032624
	d street address of the current registered agent and registered office on file with the trends of State: (If resigned, enter resigned)
	Darla Hall
	6411 SW 7th Street
	Margate, Florida 33068
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Darla Hall, President
	4095 State Road 7, Suite L222
	P.O. Box NOT acceptable
•	Wellington, Florida 33449
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatur	Printed or typed name and trie President
I hereby accept Ifurther agree of of my duties, an document is bei corporation has	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 performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this no filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
	nature of Registere Agent Cul Phus 8/9/10
If signing on be	half of an entity:
Dari	yped 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)