

P05000004274

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Ro/change  
@ 5/11/10

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: HARWOOD CONSULTANTS INC.  
Name of Corporation

DOCUMENT NUMBER: P05000004274

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:

TIMOTHY HARWOOD.  
Name of Contact Person

HARWOOD CONSULTANTS INC.  
Firm/Company

9314 E 108<sup>TH</sup> STREET S.  
Address

TULSA OK 74133  
City/State and Zip Code

dinoraharwood@myexcursions.com.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DINORA HARWOOD at 954 972-6306  
Name of Contact Person 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

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2010 MAY 10 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 29, 2010

TIMOTHY HARWOOD  
HARWOOD CONSULTANTS INC.  
9314 E. 108TH STREET SOUTH  
TULSA, OK 74133

SUBJECT: HARWOOD CONSULTANTS INC.  
Ref. Number: P05000004274

We have received your document for HARWOOD CONSULTANTS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 410A00010699

**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: HARWOOD CONSULTANTS INC.
2. The principal office address: 9314 E 108<sup>th</sup> STREETS  
TULSA OK 74133
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: JAN 2005 Document number: P05000004274
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)  
TIMOTHY HARWOOD  
3371 NW 6<sup>TH</sup> STREET  
FT LAUDERDALE FL 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
TIMOTHY HARWOOD  
7715 YAKLEY DRIVE UNIT # A113  
TAMARAC FL 33321

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TALLAHASSEE, FLORIDA  
10 MAY 10 AM 8:11

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.

[Signature]  
Signature of an officer or director

DINDRA HARWOOD  
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.

\_\_\_\_\_  
Signature of Registered Agent

5/3/10  
Date

If signing on behalf of an entity:

TIM HARWOOD  
Typed or Printed Name

PAID check #  
2018

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