

P050000023896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

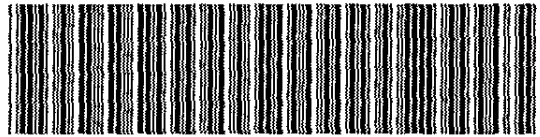
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ImmigrationLawUSA, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P05000023896

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:

Hector A. Feliciano  
(Name of Contact Person)

ImmigrationLawUSA, Inc.  
(Firm/Company)

721 Verona Street  
(Address)

Kissimmee, Florida 34741  
(City/State and Zip Code)

For further information concerning this matter, please call:

Hector A. Feliciano at (407) 427-6938  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 9, 2006

Hector A. Feliciano  
ImmigrationLawUSA, Inc.  
721 Verona Street  
Kissimmee, FL 34741

SUBJECT: IMMIGRATIONLAW USA, INC.  
Ref. Number: P05000023896.

I phoned your office on November 1, 2006 advising that when the fee was received for the statement of change of registered office/agent that no document was enclosed. I agreed to take a fax copy of the document, but no fax was received. Please return the document for filing.

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) 245-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 706A00066046

*Dear Ms. Payne:*

*Attached please find the document you requested.*

*Thank you,*

*Hector A. Feliciano*

RECEIVED

06 DEC -1 AM 8:00

DIVISION OF CORPORATIONS

**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: ImmigrationLawUSA, Inc.
2. The principal office address: 2703 EAGLE GLEN CIRCLE KISSIMMEE, FLORIDA 34746
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2-15-2005 Document number: \_\_\_\_\_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

HECTOR A. FELICIANO

5575 SO. SEMORAN BLVD. SUITE 2

ORLANDO, FLORIDA 32822

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

HECTOR A. FELICIANO

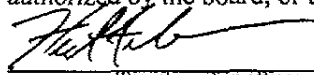
721 Verona Street

(P.O. Box NOT acceptable)

Kissimmee, Florida 34741

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.

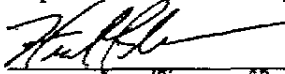


(Signature of an officer or director)

Hector A. Feliciano

(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)

11-26-2006

(Date)

If signing on behalf of an entity:

Hector A. Feliciano

(Typed 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)

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