## P06000051806

(Re	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to F	Filing Officer:		

Office Use Only



400088042014

02/19/07--01007--011 \*\*85.00

O7 MAR -7 PM 2: 10
SECRETARY OF STATE

West of the second of the seco

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: SEA FOX CONSULTING, INC. (Name of Corporation)				
DOCUMENT NUMBER: POUDDO 518 DU				
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:				
Sherrie L. Fox (Name of Contact Person)				
SEA FOX CONSULTING, INC (Firm/Company)				
312 Killarney Cay				
VERO BEACH, FL 32966 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Sherrie L. Fox (Name of Contact Person)  at (772)579-6000  (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

February 22, 2007

NHERRIE L. FOX 312 KILLARNEY CAY VERO BEACH, FL 32966

SUBJECT: SEA FOX CONSULTING INC.

Ref. Number: P06000051806

We have received your document for SEA FOX CONSULTING 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6916.

Carol Mustain Document Specialist

Letter Number: 107A00013037

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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Sta ange is submitted for a corporation organized under the laws of the State of	-Lori I	<u> </u>
	the corporation: SEA FOX CONSULTING, INC.  office address: 312 Killarney Cay	, i.u	
3. The mailing a	VERO BEACK, FL 32966 address (if different):		
4. Date of incorp	poration/qualification: Apr 11, 2004 Document number: P0600	0051	806
5. The name and	d street address of the current registered agent and registered office on file with rtment of State:		
	Corporate Agents, Inc. Suite 400 2711 Centerville Rol	SECRET!	
	Wilmington, De 19808	ARY O	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office.  Sherrie L. Fox	F STATE FLORIDA	
	312 Killarney Cay VERO BEACH, FL 32966		
as changed will		_	igent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	fficer so	
William	Uilliam C. Fox  ure of an officer or director)  (Printed or typed name and title	DIRECT	tor.
I hereby accept I further agree to of my duties, an document is beil corporation has	t 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 comp nd I am familiar with and accept the obligation of my position as registered o ing filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.	lete perforn agent. Or, confirm the	nance if this at the
Sherry	ignature of Bogistered Agent)  3-2-07 (Date)		
If signing on be	ehalf of an entity:		
	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)