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| (Re | equestor's Name) | |
| (Ac | ldress) | |
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| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Bu | ısiness Entity Nar | me) |
| (Do | ocument Number) |) |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
TALLAHASSEE FI COLE

COVER LETTER

| SUBJECT: EH&M SE | ERVICES OF FLORIDA, I | |
|----------------------------|--------------------------------------------|----------------------------------------------------------|
| | (Name of C | Corporation) |
| DOCUMENT NUMBER | R: P06000104606 | |
| The enclosed Statement of | of Change of Registered Offic | ee/Agent and fee are submitted for filing. |
| Please return all correspo | ndence concerning this matte | r to the following: |
| | | |
| • | Malcolm Leonard | |
| | (Name of Co | ntact Person) |
| ~ | | • |
| | Malcolm Leonard | , CPA |
| | (Firm/C | ompany) |
| | | |
| | 3810 Hollywood | Blvd #3 |
| | (Add | ress) |
| | | |
| | Hollywood, FL 3 | 3021 |
| | (City/State a | nd Zip Code) |
| For further information co | oncerning this matter, please | call: |
| Malcolm Leona | urd.CPA | or (954) 962-5277 |
| | Contact Person) | at (954) 962-5277 (Area Code & Daytime Telephone Number) |
| | | |
| Enclosed is a \$35.00 chec | k made payable to the Depar | tment of State. |
| | | |
| | Mailing Address: | Street Address: |
| | Amendment Section Division of Corporations | Amendment Section Division of Corporations |
| | P.O. Box 6327 | Clifton Building |

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section 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 ofFlorida |
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: EH&M SERVICES OF FLORIDA, INC. |
| 2. The principal office address: 21205 Yacht Club Drive #2505 Aventura, FL 33180 |
| 3. The mailing address (if different): 3810 HOLLYWOOD BLUD, SUITE 3 |
| 3. The mailing address (if different): 3810 HOLLYWOOD BLVD, SUITE 3 HOLLYWOOD, FLORIDA 33021 - 6730 |
| 4. Date of incorporation/qualification: 8/10/2006 Document number: P06000104606 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Barry Reuben |
| 21205 Yacht Club Drive #2505 |
| Aventura, FL 33180 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Malcolm Leonard, CPA, P.A. |
| AA O |
| 2810 Hollywood Blvd: #3 (P.O. Box NOT acceptable) |
| Hollywood, FL 33021 - 673- |
| 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 offoration has been notified in writing of the change. |
| Barry Reuben Fres. |
| (Signature of an officer of director) 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. |
| Meonard 9-13-2006 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| (T)mad or Drintad Norma) |

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