

P08600002815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900199487299

03/30/11--01020--020 **35.00

11 MAR 30 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AHS
FILED

2010
4/1/11
TC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Evaluation & Readjustment Experts, Inc.
Name of Corporation

DOCUMENT NUMBER: P08000002815

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:

Milka Gutierrez
Name of Contact Person

Evaluation Readjustment Experts, Inc.
Firm/Company

P.O.Box 823012
Address

South Florida, FL 33082-3012
City/State and Zip Code

eretax@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Milka Gutierrez at (954) 430-3322 ext: 205
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

**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: Evaluation & Readjustment Experts, Inc.
2. The principal office address: 4700 SW 139 Avenue
Miramar, FL 33027
3. The mailing address (if different): P.O.Box 823012
South Florida, FL 33082-3012
4. Date of incorporation/qualification: 01/08/2008 Document number: P08000002815
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)

Albino L Limonte (resigned)

4700 SW 139 Avenue

Miramar FL 33027

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

Milka Gutierrez

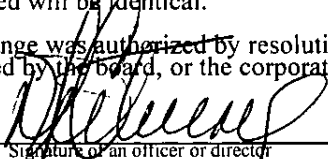
4700 SW 139 Avenue

P.O. Box NOT acceptable

Miramar FL 33027

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

Milka Gutierrez, President

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

03/24/2011

Date

If signing on behalf 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)

11 MAR 30 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED