P10000045052

(Re	equestor's Name)			
(Address)				
(Ad	ldress)	·		
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				





500288915915

08/12/16--01009--005 **35.00

FILED IN 4: 07

4/2,2 N

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRITISH AMERICAN CONSULTANTS, INC

Name of Corporation

DOCUMENT NUMBER: P10000045052

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:

David P. Roberts

Name of Contact Person

British American Consultants Inc.

Firm/Company

6597 Boca Hermosa Lane,

Address

Boca Raton, FL 33433

City/State and Zip Code

britamsec@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David P. Roberts

,,561 \594-0911

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

statement of cha	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Flori organized under the laws of the State registered agent, or both, in the State	of_Florida	
	the corporation: British Americ		ој гюнии.	
2. The principal	office address: 6597 Boca He	ermosa Lane, Boca Raton,	FL 33433	
3. The mailing a	address (if different): As Above			
4. Date of incor	poration/qualification: 5/25/	2010 Document number: P10	0000045052	
	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registered office on filesigned)	e with the	
	David P. Roberts		<u> </u>	
	3000 N. Ocean Drive, Suite 34G			
	Singer Island, FL 33404		12012	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered	FILED W. 07 FILED W. 07 FILED Office Office	
	David P. Roberts			
6597 Boca Hermosa Lane,				
	P.O. Box NOT acceptable Boca Raton, FL 33433			
The street address changed will	_	street address of the business office of	of its registered agent,	
Such change yeauthorized by the	as authorized by resolution duly ad he board, or the corporation has be	opted by its board of directors or by en notified in writing of the change.	an officer so	
	In prapolities or director	David P. Roberts Printed or typed name ar	nd title	
I further affect performatike/of	to comply with the provisions of all my duties and I am familiar with	int and agree to act in this capacity. Il statutes relative to the proper and and accept the obligation of my posi o reflect a change in the registered of fied in writing of this change.	ition as registered	
	MACON -	August 8th, 2016		
If signing on be	that of an entity:	Date		
	voed or Printed Name			

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