

P110000001734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

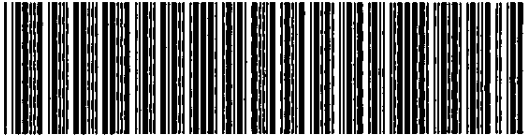
(Business Entity Name)

(Document Number)

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(1a 5.15.13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BLACK DIAMOND CONSULTING GROUP, INC
Name of Corporation

DOCUMENT NUMBER: P 11 000001734

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:

JASON SOFFER

Name of Contact Person

BLACK DIAMOND CONSULTING GROUP INC

Firm/Company

7569 SIERRA RIDGE LANE

Address

LAKE WORTH FL 33463

City/State and Zip Code

JASON BLACK DIAMOND@GMAIL.COM

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

For further information concerning this matter, please call:

JASON SOFFER

Name of Contact Person

at (561) 504 7535

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

CR2E045 (03/12)

* Please process change of address.

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: BLACK DIAMOND CONSULTING GROUP, INC
2. The principal office address: 5414 GRAND PARK PLACE BOCA RATON FL 33486
[NOTE: THIS IS THE CURRENT ADDRESS-- THIS IS BEING CHANGED]
3. The mailing address (if different): _____

4. Date of incorporation/qualification: JAN 5, 2011 Document number: P11000001734
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)

JASON SOFFER
5414 GRAND PARK PLACE
BOCA RATON FL 33486

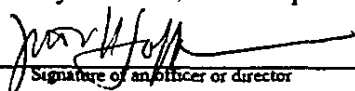
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JASON SOFFER
7569 SIERRA RIDGE LANE
P.O. Box NOT acceptable
LAKE WORTH, FL 33463

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DIVISION OF CORPORATIONS
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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

JASON SOFFER, 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

MAY 7, 2013
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
CR2B045 (03/12)