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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: OMD Consulting Inc. Name of Corporation
DOCUMENT NUMBER: P11000012254
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:
Kevin Redmond Name of Contact Person OMD Consultivity Inc Firm/Company 336 N Birch Rd 5C Address Fort Lauderdale, FL 33304 City/State and Zip Code Kevinred @ gmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lova Tornstol at (954) 547-3143 Namo 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 <u>Florde</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: OMD Consulting Inc
2. The principal office address: 336 N Birch Rd 50
Fort Lauderdek, PL 33304
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/03/2011 Document number: P11 000012254
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)
- amp consulting Inc Lora Tomstol
236 N Durch Od 56
(if changed):
Kevin Redmond
336 N Birch Road 5L BA N
Kevin Redmond 336 N Birch Road 5L P.O Box NOT acceptable FORT Landerdale, FL 3530M
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 Draft Draft Dresident Printed of 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 6/21/2018
If signing on behalf of an entity:
Typed or Printed Name