## P12600010551

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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## COVER LETTER

Amendment Section Division of Corporations

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For further information concerning this matter, please call:  Sdword A West-fell 380,500,0533  John M. West-fell 380,500,0533  Area Code & Daytime Telephone Number
City/State and Zip Code  Jody MW25+ (a) De used for future annual Leport notification)
SOIL MASSOCHUSE HUNCOMPANY Address Address Address
Rame of Contact Person
Please return all correspondence concerning this matter to the following:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
DOCUMENT NUMBER: POUDOSS
SUBJECT: Name of Corporation
•

Enclosed is a \$35.00 check made payable to the Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
1661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CBSE042 (03/15)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: EAW, Fnc.
2. The principal office address: 2011 Massachusetts Ace
Orange City FC, 32763
3. The mailing address (if different):
4. Date of incorporation/qualification: 131 2012 Document number: P120000105
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)
940 linewood Are.
Deland PL. 32124
1*** <b>**</b>
6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
2011 Massa cheuselts tree.
Orange Gty to 32763
Tr.o. Box Not acceptable
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 hoard, or the corporation has been notified in writing of the change.
Signature of an officer or director  August 1 - 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 Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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