P12000087757

(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:			





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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: ECORP INDUSTRIES INC Name of Corporation			
DOCUMENT NUMBER: 712000087757			
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:			
Name of Contact Person			
ECORP INDUSTRIES INC.			
2334 CWESTON 2D # 227 Address			
Weston Fl 33326 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (964) 6758400 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2013

TAIEB ELICKO ECORP INDUSTRIES, INC. 2334 WESTON RD #222 WESTON, FL 33326

SUBJECT: ECORP INDUSTRIES, INC.

Ref. Number: P12000087757



We have received your document for ECORP INDUSTRIES, INC. and your check(s) totaling \$95.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 413A00016248

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

statement of chai	ange is submitted for a corporation organized under the laws of the State of	this
in order	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: ECORP INDUSTRIES INC	
2. The principal	l office address: 2334 Weston, Rd + 727	
	upston 7) 38326	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 1113 Document number: P2000	87757
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Eli Tareb	
	10221 Rlue Polm St	
	+ antatron 7133324	<u>ن</u> : : : : : : : : : : : : : : : : : : :
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	Jan 19
	Eli Taleb	7
	2334 neston Rd # 272	*
	P.O. Box NOT acceptable	တ 🤻
	Weston. F1 33326	
The street addre as changed will	ress of its registered office and the street address of the business office of its register liberal to the street address of the business office of its register.	red agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer she board, or the corporation has been notified in writing of the change.	50
	Eli Tares.	
[/	use of an officer or director Printed or typed name and title	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as regi his document is being filed merely to reflect a change in the registered office addre I that the corporation has been notified in writing of this change.	stered ss, I
100	6/20/13	
Sign	gnature of Registered Agent Date	
If signing on bel	ehalf of an entity:	
	11 laes	
Ty	Typed or Printed Name	

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