## P12000096184

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Interalia Consultants, Inc. Name of Corporation
DOCUMENT NUMBER: P12000096184
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:
ADRIAN BALINT Name of Contact Person
INTERALIA CONSULTANTS, INC.
2637 E. ATLANTIC BLUD #31563
POMPANO BEACH, FL 33062 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ADRIAN BALINT at (754) 444 – 8548  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

Pursuant to the provisions of sections 607,0502, 617,0502, 607,1508, statement of change is submitted for a corporation organized under t			
in order to change its registered office or registered agent, a			
1 The name of the corporation: Interalia Consultants, Inc.			
2. The principal office address: 6251 PALM TRACE LANDING DAVIE, FL 33314	S DR., APT. 309		
3. The mailing address (if different): 2637 E. ATLA		# 31563	
POMPANO BEACH, FL 33	062		
4. Date of incorporation/qualification: 11/19/2012 Document	ment number: P1200009618	84	
5. The name and street address of the current registered agent and reg Florida Department of State: (If resigned, enter resigned)	istered office on file with the		
BALINT, ADRIAN			
6251 Palm Trace Landings Dr. #309			
Davie, FL 33314		SE TAL 15	
6. The name and street address of the new registered agent (if changed) and /or registered office  (if changed):			
InCorp Services, Inc.			
17888 67th Court North .: 51			
P.O Box NOT acceptable Loxahatchee, FL 33470		ATE RIDA	
The street address of its registered office and the street address of the as changed will be identical.	ne business office of its registe	ered agent,	
Such change was authorized by resolution duly adopted by its board authorized by the board, or the corporation has been notified in writing the corporation of the corporation has been notified in writing the corporation of the corporation has been notified in writing the corporation has been notified in which has been notified in writing the corporation has been notified in which has bee	I of directors or by an officer sting of the change.	so	
Sipantine of profice brilliegitor	IAN BALINT	PRESIDEN T	
I hereby accept the appointment as registered agent and agree to a I further agree to comply with the provisions of all statutes relative performance of my duties, und I am familiar with and accept the obagent. Or, if this document is being filed merely to reflect a change hereby confirm that the corporation has been notified in writing of	ct in this capacity.  To the proper and complete ligation of my position as regions to the projectored office addi-	istered ess. I	
300	January 2, 2015		
Signature of Registered Agent	Date		
If signing on behalf of an entity:			

Sara Brautigam on behalf of Incorp Services, Inc.
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 CR2E045 (03/12)