P13000012573

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COVER LETTER

то:	Amendment Section Division of Corporations		
SUBJE6	CT: Client Resourcing, Inc. f Corporation		
DOCU	MENT NUMBER: P13000022573		
The enc	losed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please re	eturn all correspondence concerning this	s matter to the following:	
Margare	t Cullem-Fiore		
Name o	f Contact Person		
Client R	esourcing, Inc.		
Firm/Co	ompany		
	bbell Road		
Address	;		
	Chapel, FL 33543		
City/Sta	ite and Zip Code		
	meg.cullem.fiore@gmail.com	١	
E-mail	address: (to be used for future annua	I report notification)	
For furt	her information concerning this matter, p	please call:	
Margare	t Cullem-Fiore	at (813)406-5151 Area Code & Daytime Telephone Number	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclose	d is a \$35.00 check made payable to the	Department of State.	
	Mailing Address: Amendment Section	Street Address:	
	Division of Corporations	Amendment Section Division of Corporations	
	P.O. Box 6327	The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation orga	02, 607,1508, or 617,1508, Ftorida Sidules, i mized under the laws of the State of <mark>Florida</mark> tered agent, or both, in the State of Florida.		
1. The name of t	he corporation: Client Resourcing, Inc.			
2. The principal	office address: 1710 Hubbell Road, West	ey Chapel, FL 33543		
3. The mailing a	ddress (if different): PO Box 7469, 5804	Boyette Rd, Wesley Chapel, FL 33545		
4. Date of incorp	poration/qualification: 03/09/2013	Document number: P13000022573		
5. The name and		agent and registered office on file with the		
	19420 Via Del Mar. #306			
	Tampa, FL 33647			
	-		1147 2020	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			HAY -4	e g Second
	1710 Hubbell Road		PR 5	lia
	Wesley Chapel, FL 33543			ł
	P.O. B	lox NOT acceptable	## · ·	
	0: 1.05	Cd. b		
		et address of the business office of its registe		
Such change wanthorized by the	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of directors or by an officer so notified in writing of the change.	SO	
Margaret A. Cullem-Fiore, President				
Signatu	re of an officer or director	Printed or typed name and title		
I further agrée of my duties, ar document is be	the appointment as registered agent of to comply with the provisions of all sta and I am familiar with and accept the of ing filed merely to reflect a change in a been notified in writing of this chang	atutes relative to the proper and complete pe bligation of my position as registered agent, the registered office address. I hereby confir	erformance Or, if this orn that the	
malant.	A. Culler +	May 1, 2020		
Sig	enature of Registered Agent	Date		
If signing on be	chalf of an entity:			
Margaret A. Cul	lem-Fiore, President			
1	yped or Printed Name			
	* * * FILING F	FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314