P14000067345

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA



COVER LETTER

TO: Amendment S Division of C		
SUBJECT:	FORECORE MARKETY Name of Corp	19, INC.
DOCUMENT NUM	BER: P14000067	345
The enclosed Stateme	nt of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all corre	spondence concerning this matter to	the following:
		Ct Person Leting, (NC.
	7310 WEST Me Address	CNAB ROAD, SUITE 202
	TAMARAC, FZ City/State and 2	33321 Zip Code
- E-	CMLENDING (email address: (to be used for futu	2 YAttoo .Com are annual report notification)
	n concerning this matter, please call	
OC oTT Name	of Contact Person	at (954) 461-5132 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 c	theck made payable to the Departme	ent 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

TO:

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: New ADDRESS 2. The principal office address: New ADDRESS - 3. The mailing address (if different): Document number: <u>P1</u> 4 0000 673 L 4. Date of incorporation/qualification: 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) 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): RCADS WEST MCNAB P.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 board, or the corporation has been notified in writing of the change. 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 composition has been notified in writing of this change. stered Agent If signing on behalf of an entity:

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

Typed or Printed Name