## P18 000006958

(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:			

Office Use Only



900353333519

10/08/20--01009--013 \*\*35.00

04:217.1

X ( ( ) ?

NOV 1 4 2020 \

I ALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations	¥
SUBJECT: SDM CONSULTING INC. Name of Corporation	
DOCUMENT NUMBER: P18000006958	
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:
DECANDI DEMOCEV	
DEEANN DEMPSEY Name of Contact Person	
DEMPSEY LAW, PLLC	
Firm/Company	
3007 W. BAY VISTA AVE.	
Address	
TAMPA, FL 33611	
City/State and Zip Code	
	COM
DEMPSEYLAWFL@GMAIL	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	lease call:
DEEANN DEMPSEY	at (239 \ \ 860-8883
Name of Contact Person	at (239 )860-8883 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the I	
Mailing Address:	Street Address:
Mailing Address: Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statute n organized under the laws of the State of <u>FLOR</u> rregistered agent, or both, in the State of Florida	IDA
The name of	the corporation:	NG INC.	
		TA AVENUE, TAMPA, FL. 33611	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 01/19/2018	Document number: P18000006958	
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	DEMPSEY LAW, PLLC		س
	216 NE 17TH STREET		
	DELRAY BEACH, FL 33444		
6. The name and (if changed):	l street address of the new register	ed agent (if changed) and /or registered office	6.1.21.13
	DEMPSEY LAW, PLLC		63
	3007 W. BAY VISTA AVE.		
		P.O. Box NOT acceptable	
	TAMPA, FL 33611		
The street addreas changed will	ss of its registered office and the be identical.	street address of the business office of its regis	stered agent,
/ \	_	dopted by its board of directors or by an office cen notified in writing of the change.	er so
Nee A	2- Mays	DEEANN MAYS, PRESIDENT	
_	e of an officer or director	Printed or typed name and title	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered ago comply with the provisions of a d I am familiar with and accept the filed merely to reflect a chang been notified in writing of this ca	ent and agree to act in this capacity. Ill statutes relative to the proper and complete he obligation of my position as registered agen e in the registered office address, I hereby con hange.	performance it. Or, if this firm that the
Deff	nature of Registered Agent	10/02/2020	
_	half of an entity:		
DEEANN DEMF	SEY		
T3	ped or Printed Name		

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