

P19 000004111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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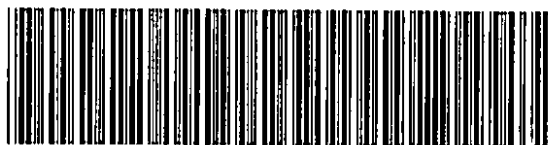
(Business Entity Name)

(Document Number)

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2019 APR 24 PM 3:26

CLERK OF COURT

C. GOLDEN

APR 25 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gold Standard EAP, Inc
Name of Corporation

DOCUMENT NUMBER: P19 00000 4111

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:

Jacqueline Cagney-Santner
Name of Contact Person

Gold Standard EAP
Firm/Company

5571 N-University Dr. Suite 101
Address

Coral Springs, FL 33067
City/State and Zip Code

Jacqueline @ goldstandardEAP.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline Cagney-Santner at (954) 544-4991
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2019

JACQUELINE CAGNEY-SANTNER
5571 N UNIVERSITY DRIVE
SUITE 101
CORAL SPRINGS, FL 33067

SUBJECT: GOLD STANDARD EAP, INC
Ref. Number: P19000004111

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 919A00006839

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TALLAHASSEE
2019 APR 24 PM 12:12

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Gold Standard EAP, Inc
2. The principal office address: 5571 N. University Dr. Suite 101
Coral Springs, FL 33067
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/10/2019 Document number: P19000004111

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)

Jacqueline Cagney
3433 Sands Harbor Trl
Pompano Beach, FL 33069

2019 APR 24 PM 3:26

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jacqueline Cagney-Santner
5571 N University DR Suite 101
P.O. Box NOT acceptable
Coral Springs, FL 33067

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.

Jacqueline Cagney-Santner Jacqueline Cagney-Santner
Signature of an officer or director Printed or typed name and title

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 corporation has been notified in writing of this change.

Jacqueline Cagney-Santner 4/16/2019
Signature of Registered Agent Date

If signing on behalf of an entity:

Jacqueline Cagney-Santner
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