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Division of Corporations

Florida Department of State Division of Corporations Execution Filing Cover Shock No. 17 Physical Actions and Associated State Shock The Control of State Shock The Con

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

1				
email	Address:			

REGISTERED AGENT CHANGE CAMBRIA CONSULTING INC.

OZZFEB I 7 PM 4:34 SECRETARY W. STATE TALLAHASSEE, FL

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Corporate Filing Menu

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COVER LETTER

(CAMBRIA CONSULTING INC.
SUBJECT:_	Name of Corporation
	P1900004693
DOCUMEN	IT NUMBER:
The enclosed	I Statement of Change of Registered Office/Agent and fee are submitted for filing
Please return	all correspondence concerning this matter to the following:
	CHEYENNE MOSELEY
	Name of Contact Person
	LEGALZOOM.COM, INC.
	Firm/Company 4
	101 N BRAND BLVD., 11TH FLOOR
	Address
	GLENDALE, CA 91203
	City/State and Zip Code

For further information concerning this matter, please call:

773-0888 ext 9724 800 CHEYENNE MOSELEY, LEGALZOOM.COM, INC. at 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

statement of change is submitted for a corporation organized under the laws of the State of FL
in order to change its registered office or registered agent, or both, in the State of Florida.
The name of the corporation: CAMBRIA CONSULTING INC. The principal office address: 2330 Palm Ridge Rd Sanibel, FL 33957
2. The principal office address.
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/15/2019 Document number: P19000004693
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)
BUSINESS FILINGS INCORPORATED
1200 South Pine Island Road
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
UNITED STATES CORPORATION AGENTS, INC.
5575 S. Semoran Blvd. Suite 36
P.O. Box NOT acceptable Orlando, FL 32822
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.
Lynn Saladini, President 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.
O2/17/2022 Signature of Registered Agent Date
If signing on behalf of an entity:
CHEYENNE MOSELEY, ASSISTANT SECRETARY, ON BEHALF OF UNITED STATES CORPORATION AGENTS, INC. Typed or Printed Name

* * * FILING FEE: \$35:00 * * *