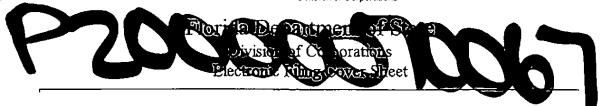
10/7/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000349665 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

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

Email Address:

## REGISTERED AGENT CHANGE EM KEY CONSULTING, INC

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Certified Copy	0
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Estimated Charge	\$35.00

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## COVER LETTER

H200003496653

TO: Amendment Section Division of Corporations

Name of Corporation
DOCUMENT NUMBER: P20000070067
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:
Jackie DeFilippis
Name of Contact Person
InCorp Services, Inc.
Firm/Company
3773 Howard Hughes Pkwy. · Suite 500S
Address
Las Vegas, NV 89169-6014
City/State and Zip Code
Documents@incorp.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jackie DeFilippis on behalf of InCorp Services, Inc. at 800-246-2677 Ext. 6915
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

CR2E045 (04/13)

## H 20000 344645 ろ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607. inge is submitted for a corp ir to change its registered (	poration organized	•	e of FL
1. The name of	the corporation: EM Key	Consulting, Inc		
	office address: 803 3RD		erde, FL 33715	
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:	09/01/2020	Document number:	P20000070067
	d street address of the curre rtment of State: (If resigne		t and registered office on f	ile with the
	SNYDER, MICHAEL S			
	803 3Rd Ave S			
	Tierra Verde, FL 3371	15		
6. The name and (if changed):	d street address of the new InCorp Services, Inc.	registered agent (i	f changed) and /or register	ed office
	17888 67th Court Nor	th		-7
		P.O. Box NO	T acceptable	<del></del>
	Loxahatchee, FL 3347	70		<u>15</u>
The street addr	ess of its registered office I be identical.	and the street add	ress of the business office	e of its registered agent,
Such change w authorized by t	as authorized by resolution he board, or the corporation	n duly adopted by on has been notifie	its board of directors or bed in writing of the change	oy an officer so e.
• • •	thia Boyatt	(	Cynthia R. Boyatt, Direc	
I hereby accept I further agree of my duties, ar document is be	te of an office of director  t the appointment as regis, to comply with the provis, to am familiar with and ing filed merely to reflect to been notified in writing	ions of all statutes accept the obligat a change in the re	Printed or typed name gree to act in this capacity relative to the proper an ion of my position as regi gistered office address, I	υ
	chialthor	21 <u>0</u>	September 2	25, 2020
$\mathcal{O}^{-1}$	ehalf of an entity:		Date	
Jackie D	eFilippis on behalf of InC	orp Services, In	c.	
,		* FILING FEE:	\$35.00 * * *	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

H200003494653