

P94 0000 66488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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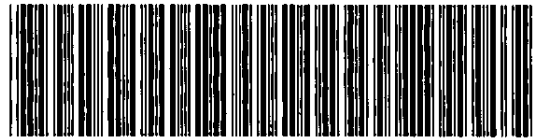
(Business Entity Name)

(Document Number)

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APPROVED  
AND  
FILED

14 MAY 20 PM 12:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
JUN 3 2014  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** EAC Consulting, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P94000066488

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:

Marie Chong  
Name of Contact Person

EAC Consulting, Inc.  
Firm/Company

5100 NW 33rd Avenue, Suite 243  
Address

Ft. Lauderdale, FL 33309  
City/State and Zip Code

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

For further information concerning this matter, please call:

Marie Chong at 305 265-5489  
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**

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: EAC CONSULTING, INC.
2. The principal office address: 5100 NW 33rd Avenue, Suite 243  
Ft. Lauderdale, FL 33309
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/06/1994 Document number: P94000066488
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)

Enrique Crooks

815 NW 57th Avenue, Suite 402

Miami, FL 33126

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

Enrique Crooks

5100 NW 33rd Avenue, Suite 243

P.O. Box NOT acceptable

Ft. Lauderdale, FL 33309

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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.

  
\_\_\_\_\_  
Signature of an officer or director

Enrique Crooks, President

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.*

  
\_\_\_\_\_  
Signature of Registered Agent

5/19/14  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

ENRIQUE Crooks  
\_\_\_\_\_  
Typed or Printed Name

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