## P96000006869

(Re	equestor's Name)	
(Ac	idress)	<u> </u>
(Ac	idress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL.
(Ви	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: International Brokerage Facilities, Inc.
(Name of corporation)
DOCUMENT NUMBER: P96000006869
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:
Paula Albertson (Name of contact person)
International Brokerage Facilities, Inc. (Firm/Company)
110 W. Reynolds Street, Suite 104 (Address)
· · ·
Plant City, FL 33563
(City/state and zip code)
For further information concerning this matter, please call:
Paula Albertsonat (813) 707-0892
(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 409 E. Gaines Street Tallahassee, FL 32399

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: International Brokerage Facilities, Inc
2. The principal	office address: 110 W. Reynolds Street, Suite 104, Plant City, FL 33563
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 1/22/1996 Document number: P96000006869
	d street address of the current registered agent and registered office on file with the rtment of State:
-	Paula Albertson
	709 Keyville Road E.
	Lithia, FL 33547
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Paula Albertson
	110 W. Reynolds Street, Suite 104
	(P.O. Box NOT acceptable)
	Plant City, FL 33563
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
(Signate	Paula Albertson  (Printed or typed name and title)
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
If signing on be	chalf of an entity:
Paula Albertson	Typed or Printed Name)

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