## P97000019591

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DOLORES M. & 4301 NORT BOCA RA	HOCEAN BL TON, FL 334	,νυ.	
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	☐ MAIL	
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03/26/03--01050--003 \*\*35.00



RA Chg.

## 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 the undersigned corporation organized under the laws of the State of FLORIOD submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation: HINKLEY CONSULTING, INC.	_
2. The mailing address of the corporation: 4301 H, OCESH BLUD. APT. A-16	0
BOCA RATON FL 33431 OF	仌
3. Date of incorporation/qualification: $3-3-97$ Document number: $9700019$	S
2. The mailing address of the corporation: 430/ H, OCESH /3LVD. APT. A - 16  BOCA RATON I=C 3343/  3. Date of incorporation/qualification: 3-3-97 Document number: 997000019  4. The name and address of the current registered agent and registered office:	9
CURPORATION SERVICE CO.	
1201 1+445 ST.	<b>多</b> 。
TALLAHASS EE PL 32301	(
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):  (P.O. Box NOT Acceptable)	
CHARLBS S. WILEOTA	
4301 H. OCESH BLUD. APT A-1608	
BOCG RATON , FL. 33431	
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. アモミ	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.	
(Signature of an officer, chairman or vice chairman of the board)  (Date)	
CHARLES S. WILSOM PRESIDENT (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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.	
Charles & Liston President 3-29-03 (Signature of Registered Agent) (Date)	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
CHARLBS 5. WILSON PRESIDENT (Typed or Printed Name) (Capacity)	

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