

EAGLE MANAGEMENT USA, INC
P O BOX 8269
LONGBOAT KEY, FL 34228

500002324455--6
-10/20/97--01115--008
*****35.00 *****35.00

City/State/Zip Phone #
P97000079811
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

97 OCT 28 AM 11:11
DIVISION OF REVENUE

10-28-97

Examiner's Initials **CC**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 22, 1997

EAGLE MANAGEMENT USA, INC.
P.O. BOX 8269
LONGBOAT KEY, FL 34228

SUBJECT: EAGLE MANAGEMENT USA, INC.
Ref. Number: P9700079811

We have received your document for EAGLE MANAGEMENT USA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

A post office box is not an acceptable address for the registered agent.

You may make corrections on your document or start over and use the form enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 997A00051505

Florida Department of State, Sandra B. Mortham, Secretary of State

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 _____ 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 is: Eagle management USA, Inc.

2. The mailing address of the corporation is: P O Box 8269
Longboat Key FL 34228

3. Date of incorporation/qualification: Sept. 15, 1997 Document number: A97000079811

4. The name and address of the current registered agent and office:

Fillings, Inc
3732 N.W. 16th Street
Ft Lauderdale, FL 33311

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5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Justo Lopez
3303 Sabal Cove Cir
Longboat Key FL 34228

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.

[Signature] 9/15/97
(Signature of an officer, chairman or vice chairman of the board) (Date)

Justo P. Lopez, 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.

[Signature]
(Signature of Registered Agent)

9/15/97
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)