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TO: Amendment Section
Division of Corporations

SUBJECT: IMS Telecom Consulting, Inc.

Name of Corporation

DOCUMENT NUMBER: EIN 59-3550270

P98000105836

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:

Louise C. Smith

Name of Contact Person

IMS Telecom Consulting, Inc.

Firm/Company

1978 Wolf Laurel Dr

Address

Sun City Center, FL 33573

City/State and Zip Code

Lsmith4health@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louise C. Smith

Name of Contact Person

at 813 641-8202

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

