

S15597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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HARRIS COUNTY, TEXAS

C. LEWIS
SEP 18 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DEV INC
Name of Corporation

DOCUMENT NUMBER: S15597

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:

ASHIK KUMAR
Name of Contact Person

DEV INC.
Firm/Company

7150 KIMBERLY BLVD
Address

N. LACODERDALE, FL 33068
City/State and Zip Code

KM9ASH@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ASHIK KUMAR at 954 298-4673
Name of Contact Person Area Code & Daytime Telephone Number
954 726-1799

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: DEV INC.
2. The principal office address: 7150 KIMBERLY BLVD
N. LAUD. FL 33068
3. The mailing address (if different): _____

4. Date of incorporation/qualification: DEC 09, 1990 Document number: S 15597
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)

APARNA DAS (RESIGNED)*SEE TRANSMITTAL
750K Kimberly Blvd
N. LAUD. FL 33068
LETTER *

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

ASHIK KUMAR
7150 KIMBERLY BLVD
P.O. Box NOT acceptable
N. LAUDERDALE FL 33068

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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.

ASHIK KUMAR
Signature of an officer or director

ASHIK KUMAR
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.

ASHIK KUMAR
Signature of Registered Agent

08-31-13
Date

If signing on behalf of an entity:

Typed or Printed Name

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