

# F06000007581

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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Fax Number : (850) 878-5368

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE  
MIRAGE CONSULTING, INC. OF TX

Certificate of Status	0
Certified Copy	0
Page Count	03
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APR  
12/29/10  
12/29/2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MIRAGE CONSULTING, INC. OF TX  
Name of Corporation

**DOCUMENT NUMBER:** F06000007581

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:

Anthony Falzone  
Name of Contact Person

Omega Solutions  
Firm/Company

48621 Hayes Road  
Address

Shelby Township, MI 48315  
City/State and Zip Code

afalzone@omega-peo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony Falzone at ( 386 ) 566-6489  
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  
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 Texas in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MIRAGE CONSULTING, INC. OF TX
2. The principal office address: 155 SHILOH COURT, COPPELL TX 75019
3. The mailing address (if different): 48621 HAYES ROAD, SHELBY TOWNSHIP MI 48315

4. Date of incorporation/qualification: 12/07/2006 Document number: F06000007581

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)

SILAMIANOS, MARIA  
10972 PINE LODGE TRAIL  
DAVIS FL 33328 US

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

C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
P.O. Box NOT acceptable  
Plantation, Florida 33324

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.

[Signature]  
Signature of its officer or director

ANTHONY FALONE, Dir of Finance  
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.

By: [Signature]  
Signature of Registered Agent

12-9-10  
Date

If signing on behalf of an entity: Kelly Halford  
Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
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