

739541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

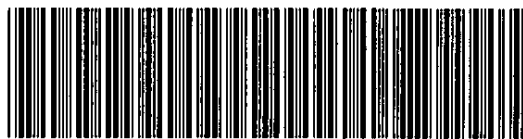
(Business Entity Name)

(Document Number)

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09 NOV 23 AM 9:25  
DIVISION OF CORPORATIONS

T. Roberts NOV 25 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 12, 2009

DIANA SUSI  
AYUDA, INC.  
13899 BISCAYNE BLVD, STE 123  
NORTH MIAMI BEACH, FL 33181

SUBJECT: AYUDA, INC.  
Ref. Number: 739541

We have received your document for AYUDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 609A00035342

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Ayoda Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 739541

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:

Diana Sosi  
Name of Contact Person

Ayoda Inc.  
Firm/Company

13899 Biscayne Blvd #123  
Address

North Miami Beach, FL 33181  
City/State and Zip Code

dianasosi@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diana Sosi at (305) 992-5437  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED  
2009 NOV 23 AM 8:00  
DIV OF STATE  
TALLAHASSEE, FL  
CR2E04 (8/05)

**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: Ayuda, Inc.
2. The principal office address: 13899 Biscayne Blvd. #123  
North Miami Beach, Fl. 33181
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 7/01/77 Document number: 739541

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)

RESIGNED { Luis Alberto DE JESUS  
13899 Biscayne Blvd #123, North  
Miami Beach, Fl. 33181

09 NOV 23 AM 9:25  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

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

Diana Susi  
13899 Biscayne Blvd #123, North  
P.O. Box NOT acceptable  
Miami Beach, Fl. 33181 -

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 of an officer or director

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.

Signature of Registered Agent

Date

If signing on behalf of an entity:

DIANA SUSI  
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

CR2E045 (8/05)