

F15D000002495

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(Business Entity Name)

(Document Number)

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I ALBRITTON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TS WACHES INTERNATIONAL SA INC  
Name of Corporation

**DOCUMENT NUMBER:** F15000002495

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:

Albert Bordas

Name of Contact Person

Albert Bordas, P.A.

Firm/Company

5975 Sunset Drive, Suite 705

Address

Miami, FL 33143

City/State and Zip Code

albert@bordasiplaw.com

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

For further information concerning this matter, please call:

Albert Bordas

Name of Contact Person

at ( 305 ) 669-9848

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 8, 2015

ALBERT BORDAS  
ALBERT BORDAS, PA  
5975 SUNSET DRIVE - STE. 705  
MIAMI, FL 33143

SUBJECT: TS WACHES INTERNATIONAL SA, INC.  
Ref. Number: F15000002495

We have received your document for TS WACHES INTERNATIONAL SA, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 115A00025672

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**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: TS WACHES INTERNATIONAL SA, INC  
2. The principal office address: ZONA libre de Colon Calle 14 -C Ave.  
Roosevelt Manzana 8 local 2 y 3, Provincia de Colon, Panama  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 06/02/2015 Document number: F150000024915

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)

Albert Borda  
5975 Sunset Drive, Suite 607  
Miami, FL 33143

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

Albert Borda  
5975 Sunset Drive, Suite 705  
Miami, FL 33143  
P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

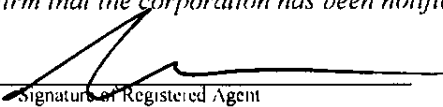
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

12/14/15  
Date

If signing on behalf of an entity:

Albert Borda  
Typed or Printed Name

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