N43479

(Re	equestor's Name)
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<u>(Ci</u>	ty/State/Zip/Phone #)
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PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
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(Do	ocument Number)
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Constitut Constant	0-15-1
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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2008 JUN -6 PM 2: 33
SECRETARY OF STATE

R.A. Change

TB 6/9/18

COVER LETTER

Division of Corporations		
SUBJECT: Mid EAStern Dance Exchange, Inc. (Name of Corporation)		
DOCUMENT NUMBER: N 434 79		
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:		
Madeira (Name of Contact Person)		
(Name of Contact Person)		
Mid Eastern Davce Exchauge (Firm/Company)		
(Firm/Company)		
1725 James Ave#19 (Address)		
(Address)		
Miami BEACH, F1. 33139 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (206) 226-3872 (Area Code & Daytime Telephone Number)		
(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 $\frac{\int d r r d r}{r}$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Mid Eastern Dance Exchange, Inc. 2. The principal office address: 1725 James Ave #19
2. The principal office address: 1725 James Ave #19
Miami B sach, F1. 33139
3. The mailing address (if different):
- hualida
4. Date of incorporation/qualification: 5/20/199/ Document number: N43479
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Tamalyn Harris
Tamalyn Harris 9574 NW 1st Ct.
Miami Shores, F1. 33150 PE = T
6. The name and street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed): TI FLAND MADE 10
1725 James Ave #19 (P.O. Box NOT acceptable)
(P.O. Box NOT acceptable) MIAMI BEACH, F1. 33139
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) Tamuly Harris (Presidential) (Signature of an officer or director)
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)
If signing on behalf of an entity:
(Tuned or Printed Name)

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