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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: UNISOURCE DISCOVERY, INC. (Name of Corporation) DOCUMENT NUMBER: P06000082503
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:
NOEL MIJARES
(Name of Contact Person)
UNISOURCE DISCOVERY, Inc.
(Firm/Company)
4500 BISCAYNE BLVD., PENTHOUSE N
(Address)
MIAMI, FL. 33137
(City/State and Zip Code)
For further information concerning this matter, please call:
NDEL WIJARES (Name of Contact Person) at (305) 674-1370 (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, the statement of change is submitted for a corporation organized under the laws of the State of FLDK		
	in order to change its registered office or registered agent, or both, in the State of Florida.	
	1. The name of the corporation: UNISOURCE DISCOVERY INC	
	2. The principal office address: 4506 KISCHYNE BLVD, PENTHOUSE-N MIHMI, FL. 33137	
	3. The mailing address (if different): SAME	
	1-15-01 PN 0000 CO 502	
	4. Date of incorporation/qualification: 6-15-06 Document number: PD600082 503	
	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
	NOEL MIJARES	
	1800 PURDY AVE, SUITE 1209	
	MIAM) BEACH, FL- 33139 == == ==	
	6. The name and street address of the new registered agent (if changed) and /or registered office	
	(if changed): NOEL MITANES	
	4500 BISCAYNE BLVD.	
	PENTHOUSE-N, MIAMI, FL. 33137 gri	
	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.	
	DOOD DE VILLE NOTE NOTED NOTED DITTECTOR	
	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.	
	Ool Of Registered Agent) 7/17/06 (Date)	
	If signing on behalf of an entity:	
	(Typed or Printed Name)	

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