P14000098221

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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation

POCLIMENT NUMBER: P14000098221

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:

Esperanza Rivero Name of Contact Person HEALTH GROUP SOLUTION CORP Firm/Company 11750 sw 26 terrace Address Miami, FI 33175 City/State and Zip Code

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

For further information concerning this matter, please call:

Esperanza Rivero at (786) 738-1821

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, thi. n organized under the laws of the State of February 3, r registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: HEALTH GF	ROUP SOLUTION CORP		
2. The principal	office address: 11750 sw 26	terrace Miami, Florida 33175		
	· · · · · · · · · · · · · · · · · · ·			
3. The mailing a	ddress (if different): 11750 sv	v 26 Terrace Miami, Florida 33175		
4. Date of incorp	oration/qualification: 02/03/2	2015 Document number: P1400009822	1	
	street address of the current regitment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	Resigned		e ::	,
		<i>\(\triangle\)</i>	15 F	: : (/) : (/)
		· ,	83	2년 2년
			<u>-</u> 9	7.6 2.2
6. The name and (if changed):	street address of the new registe	red agent (if changed) and /or registered office	PH 3:	CORPORATION
	Esperanza Rivero		51	
	11750 sw 26 terrace M	liami, Florida 33175		
	P.O.	Box NOT acceptable		
The street addre	ss of its registered office and the	e street address of the business office of its registered	agent,	
Such change wa authorized by the	s authorized by resolution duly a board, or the corporation has be	adopted by its board of directors or by an officer so been notified in writing of the change.		
- Eu	e of an officer or director	Esperanza Rivero. President		
I hereby accept	the appointment as registered a	Printed or typed name and title gent and agree to act in this capacity.		
I further agree to performance of	o comply with the provisions of mv duties, and I am familiar wit	all statutes relative to the proper and complete h and accept the obligation of my position as register to reflect a change in the registered office address, otified in writing of this change.	red I	
15an	œ	02/03/2015		
Sign	nature of Registered Agent	Date		
If signing on bel	nalf of an entity:			
<u>Esperan</u>	2A / VOTO ped or Printed Name	-		

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