

P20 000039730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

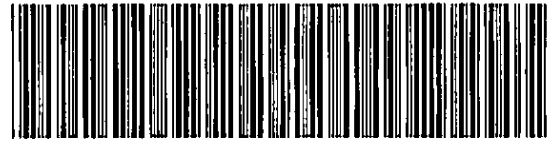
(Business Entity Name)

(Document Number)

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2021 AUG 13 AM 8:47
STATE OF MASSACHUSETTS

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Salta Americas Inc.
Name of Corporation

DOCUMENT NUMBER: P20000039730

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:

Paul G. Davidson

Name of Contact Person

Heritage Accounting & Tax Service Inc.

Firm/Company

5220 SW 64th Ave

Address

Davie, FL 33314

City/State and Zip Code

E-mail address: (to be used for future annual report notification) TOM@HERITAGE TAX SERVICES.COM

For further information concerning this matter, please call:

Paul G. Davidson

at (954) 907-3194

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Salta Americas Inc.

2. The principal office address: 11154 Neptune Dr.
Hollywood, Florida 33026

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/27/2020 Document number: P20000039730

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)

BARK, THOMAS W
2037 NE 6TH TERRACE
WILTON MANORS, FL 33305

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

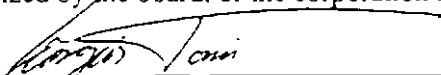
Heritage Accounting & Tax Service Inc.
5220 SW 64th Ave
Davie, FL 33314

P.O. Box NOT acceptable

STATE DEPARTMENT OF STATE
TALLAHASSEE, FL
2021 AUG 13 AM 8:40
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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

Georgios Toris, VP
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.

Raul de la Campa, CPA
Raul de la Campa, CPA (Jul 29, 2021 12:36 EDT)
Signature of Registered Agent

7/28/21
Date

If signing on behalf of an entity:
Raul de la Campa, CPA
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 (04/13)