

P01000050807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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RA Change

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TALLAHASSEE, FLORIDA

MR 9/23/05

**00789, 00524, 00672*

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Volusia Securities Inc

Signature _____

Requested by: *SW*

9/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
☒ ~~RA Resignation~~ *Change* _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____

Courier _____

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of FLORIDA
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : VALUSIA SECURITIES INC.
2. The mailing address of the corporation : Dama De Noche 1,
29640 FUENGIBOLA / LOS PAGOS, MALAGA SPAIN
3. Date of incorporation/qualification: 22.5.2001 Document number: P01000050807
4. The name and address of the current registered agent and office:

Capital Connection, Inc
417 E. Virginia St. Suite 1 32301
P.O. Box 10349 Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P. O. Box Not Acceptable)

Capital Connection, Inc
417 E. Virginia St. Suite 1
Tallahassee FL 32301

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.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

9.15.2005
(Date)

Anne Mikkonen Director
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Leilani White
(Signature of Registered Agent)

9/22/05
(Date)

If signing on behalf of an entity:

Leilani White
(Typed or Printed Name)

Representative
(Capacity)

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