## P080000356/3

(Reques	tor's Name)	
(Address)		
(Address	3)	
(riadiosc	•)	
(City/Sta	te/Zip/Phone #)	
PICK-UP	] WAIT	MAIL
(Busines	s Entity Name)	
(Docume	ent Number)	<del></del>
Certified Copies	Certificates of	Status
Certified Copies	Certificates of	Otatus
Special Instructions to Filing	Officer:	
1		
		. [
<u></u>		

Office Use Only



900181655989

06/07/10--01020--006 \*\*35.00

SEUNCIARY OF STATE



## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Name of Corporation		
Number of Corporation		
DOCUMENT NUMBER: <u>P08000025613</u>		
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:		
MARKO CERENKO  Name of Contact Person		
Firm/Company		
1330 WEST AVE, # 2312		
MIAMI BEACH, FL 33139 City/State and Zip Code		
E-mail address: (to be used for futble annual report notification)		
For further information concerning this matter, please call:		
MARKO CERENKO at (305) 766-9639  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  Amendment Section		

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: AMMOWORKS, INC.
2. The principal office address: 2228 PARY AVE, #2
MIAMI BEACH, FL 33139
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/10/08 Document number: P0800025613
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)
EFRAIM DIVEROLI
3801 Callins Aue #503
MIAMI BEACH, FL 33140
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
EFraim Diveroli
_ 2228 Park Que #2
Miani Bealh, Fl. 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.
EFRAIM DIVEROLI - PRESIDENT Signature of an officer or director  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.
Episin June 2, 2010
Signature of registered regent
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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