

P09000063289

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EOSOL AMERICAS, INC.
Name of Corporation

DOCUMENT NUMBER: P09000063289

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:

Miguel A. Maspons, Esq.

Name of Contact Person

Abadin Cook

Firm/Company

9155 South Dadeland Blvd., Dadeland Centre, Suite 1208

Address

Miami, FL 33156

City/State and Zip Code

mmaspons@abadincook.com

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

For further information concerning this matter, please call:

Vanessa M. Fortun

Name of Contact Person

at (305)

671-2141

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2011

June 16, 2011

From: MIGUEL A. MASPONS, ESQ.
ABADIN COOK
9155 SOUTH DADELAND BLVD., SUITE 1208
MIAMI, FL 33156

SUBJECT: EOSOL AMERICAS INC
Ref. Number: P09000063289

We have received your document for EOSOL AMERICAS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document accordingly. ~~Corrected by See attached~~

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

To: Thelma Lewis
Document Specialist Supervisor

Letter Number: 611A00014699

**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: EOSOL AMERICAS, INC.
2. The principal office address: 7301 S.W. 57th Court, Suite 440, Miami, FL 33143
3. The mailing address (if different): Same.
4. Date of incorporation/qualification: 7/25/09 Document number: P09000063289
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)

Alex D. Sirulnik, Esq.

1000 E. Hallandale Beach Blvd., Suite B

Hallandale Beach, FL 33009

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

Miguel A. Maspons, Esq.

9155 South Dadeland Blvd., Dadeland Centre, Suite 1208

P.O. Box NOT acceptable

Miami, FL 33156

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

Agustin A. Abalo, President

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.

Signature of Registered Agent

June 9, 2011

Date

If signing on behalf of an entity:

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 (8/05)

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TALLAHASSEE FLORIDA