

P10000045430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

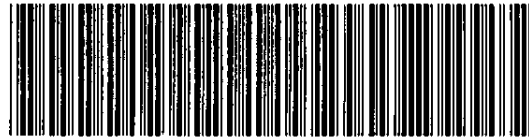
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
NOV 28 AM 12:00

*R.A. Chg.*  
C.COULLIETTE

DEC 01 2011

EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PGX Corporation  
Name of Corporation

**DOCUMENT NUMBER:** P10000045430

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:

Solange S. Lopes  
Name of Contact Person

Firm/Company

245 SE 1st Street # 320  
Address

Miami, FL 33131  
City/State and Zip Code

solangelopes2002@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Solange S. Lopes at ( 305 ) 533-1127  
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**

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: PGX Corporation
2. The principal office address: 245 SE 1st. Street # 320 Miami, FL 33131
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/26/2010 Document number: P10000045430
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)

Ana Maria Peixoto  
2230 NE 122nd Street  
North Miami, FL 33181

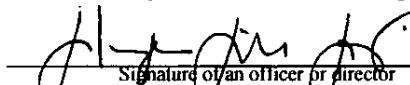
6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

Solange S Lopes  
245 SE 1st. Street # 320  
Miami, FL 33131

P.O. Box NOT acceptable

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

Solange S Lopes- 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

11-23-2011  
\_\_\_\_\_  
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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
NOV 28 AM 12:00