

PO1000045717

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000235743 3)))



H15000235743ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : ALVAREZ ARRIETA & DIAZ-SILVEIRA LLP
Account Number : I20130000001
Phone : (305) 740-1940
Fax Number : (305) 740-1941

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mcuevas @ uadsilaw.com

**REGISTERED AGENT CHANGE
TRANSCENDENT GROUP HOLDING INC.**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$43.75

RECEIVED
OCT -1 PM 12:07

OCT 02 2015
C. CARROTHERS

RECEIVED
OCT 02 2015
TALLAHASSEE, FLORIDA

2015 OCT -1 AM 9:47

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Transcendent Group Holding Inc.
Name of Corporation

DOCUMENT NUMBER: P01000045717

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:

Marta Cuevas

Name of Contact Person

Alvarez Arrieta & Diaz-Silveira LLP

Firm/Company

1001 Brickell Bay Drive Suite 2110

Address

Miami, FL 33131

City/State and Zip Code

mcuevas@aadslaw.com

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

For further information concerning this matter, please call:

Marta Cuevas

Name of Contact Person

at (305) 740-1940

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Transcendent Group Holding Inc.
2. The principal office address: Sveavagen 20, Stockholm, Sweden 111 57 SE
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/7/2001 Document number: P01000045717
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)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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

Alvarez Arrieta & Diaz-Silveira LLP

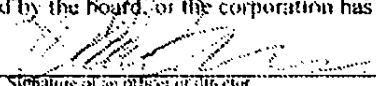
1001 Brickell Bay Drive Suite 2110

P.O. Box NOT acceptable

Miami, FL 33131

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

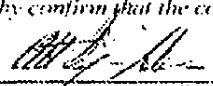
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Hakan Berg

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

10/1/15
Date

If signing on behalf of an entity:

Albert Diaz-Silveira

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
(877)645-1037

FILED

2015 OCT - 1 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA