## PU70000 69966

(F	Requestor's Name)	
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Ã)	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	<del></del>
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RA Office Change

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## COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SUPER JEWELS Name of Corporation	INC
DOCUMENT NUMBER: PO70000 699	6.6
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	to the following:
SAN JAY AGNANI Name of Contact Person	
Name of Contact reison	
SUPER JEWELS INC	
Address	<del></del>
777 NW 72 AVE # 1110 Address  MIAMI FL 33126 City/State and Zip Code	
City/State and Zip Code	-1 .
E-mail address: (to be used for future annual report	notification)
15-man address. (to be used for rature annual report	
	- Lig
For further information concerning this matter, please ca	dl:
SANTAY AGNANI	11 646 ) 275 71889 SE
Name of Contact Person	at (646) 275 71883 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departn	nent of State. 第章
	े के <u>कि</u> ता हो
Mailing Address:	Street Address:
Amendment Section	Amendment Section Division of Corporations
Division of Corporations P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
· ····································	Tallahassee, FL 32301

CR2E045 (04/13)

## 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 FORIDA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SUPER JEWELS INC
2. The principal office address: 777 Nw 72 AVC m 1 Avn 1 =
777 NW 72NO AVE #2078 MIAMI FL 33,26
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/14/2017 Document number: P0700069966
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)
SANJAY AGNANI
777 NW 72 AVE # 2078
MIAMI F2 33126
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
SANJAY AGNANI
777 NW 72 AVE # 11/0  P.O. Box NOT acceptable
P.O. Box NOT acceptable
$\frac{M/A_{IMI}}{M_{I}} = \frac{33/26}{3}$
The street address of its registered office and the street address of the business office of its registered agent?
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.
SANJAY AGNANI PRESIDENT.  Signature of an opticer 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
SHNJAY AGNANI 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, TAILLAHASSEE, FL 32314
CR2E045 (04/13)