## SIGNATURE: L. SMEJDA

# MIAMI, FL 33139

Entity Name: AMAREX CORPORATION

**Current Principal Place of Business:** 

#### **Current Mailing Address:**

1602 ALTON RD SUITE 100 MIAMI, FL 33139 US

DOCUMENT# M95744

1602 ALTON RD SUITE 100

#### FEI Number: 65-0076883

#### Name and Address of Current Registered Agent:

INTERNATIONAL CENTER 150 SE 2ND AVENUE 1002 MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

### SIGNATURE:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

City-State-Zip: MIAMI BEACH FL 33139

	Title	DPS	Title	VPAS
	Name	ALEXANDER, A	Name	VALLEE, A
	Address	1602 ALTON RD. STE 100	Address	1602 ALTON ROAD, STE. 100
	City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139
	Title	VPT	Title	VPAS
	Name	HENNING, V.	Name	VALLEE, S.
	Address	1602 ALTON ROAD, STE. 100	Address	1602 ALTON ROAD, STE. 100
	City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139
	Title	AS		
	Name	SMEJDA, L.		
	Address	1602 ALTON ROAD 100		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### FILED Apr 29, 2013 Secretary of State CC2842238256

Certificate of Status Desired: Yes

Date

AS

Electronic Signature of Signing Officer/Director Detail