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.

SIGNATURE: CARLOS A RONDON

Electronic Signature of Signing Officer/Director Detail

2015	FLORIDA	PROFIT	CORPORAT	γιον α	NNUAL	REPORT
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DOCUMENT# P03000103108

Entity Name: GOOD NEWS CARRIER INC.

Current Principal Place of Business:

7535 SW 152ND AVENUE APT. #C-201 MIAMI, FL 33193

Current Mailing Address:

11026 SW 138 PL MIAMI, FL 33186 US

FEI Number: 35-2215180

Name and Address of Current Registered Agent:

RONDON, CYNTHIA 7535 SW 152ND AVENUE APT. #C-201 MIAMI, FL 33193 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 :

Title	PTD	Title	VP
Name	RONDON, CYNTHIA	Name	RONDON, CARLOS A
Address	11026 SW 138 PL	Address	7535 SW 152ND AVENUE APT, #C-201
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33193

ector Detail

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

FILED May 13, 2015 Secretary of State CC3290748843

Certificate of Status Desired: No

Date

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