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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: STATUS-ONE JUVESTMENTS INC. Name of Corporation
DOCUMENT NUMBER: FO   000000 723
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:
EARL TAKEFMAN  Name of Contact Person  N/A  Firm/Company  851 NE 1-+ AVENUE, #3709  Address  MIANI FI 32132
MIAMI FL 33132 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
EARL TAXEFMAN at ( 786 ) 757-0780  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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## statement of change of registered office or registered agent or both for corporations

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <b>DEADALE</b> **ToD** in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: STATUS-ONE INVESTMENTS INC.  2. The principal office address: 851 NE Ist AVENUE, #3709
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/04/2001 Document number: FOI 000000 723
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)
RESIGNED
6. The name and street address of the new registered agent (if changed) and /or registered offices (if changed):  EARL TAKEFUAN  SSEC JUL 20  AM 8:  SSI NE 1st AVENUE #3709  P.O. Box NOT acceptable  MIAMI, FL 33132
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.
Mona-Lee Jakefman Mona-Life TAKERNAN, 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 uptified in writing of this change.    Signature of Registered Agent   Date   Date
EARL TAKEFMA N  Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*