Division of Corporations

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To:

Division of Corporations

Fex Number : (850)617-6380

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number: 071001002335 : (305)599-0839

Fax Number : (305)716-0346

REGISTERED AGENT CHANGE

ZTZ SERVICE INTERNATIONAL, INC.

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State ange is submitted for a corporation organized under the laws of the State of $\frac{FL}{L}$	ORIDA	
	er to change its registered office or registered agent, or both, in the State of Flor	าสน.	
	the corporation: ZTZ SERVICE INTERNATIONAL, INC.		
	office address: 1970 NE 153RD ST. BAY # 14		
NORTH M	MAMI BEACH, FL 33162		
	address (if different): 1970 NE 153RD ST. BAY # 14 MIAMI BEACH, FL 33162		
4. Date of incorp	poration/qualification: 08/08/2001 Document number: F01	000004248	
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	he	
•	ZALYA A. BERLER	i	
	17275 COLLINS AVE #307	1 2	
	SUNNY ISLES BEACH FL 33160	ZOO9 AUG SECRET TALLAHA	414
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	27 ARY SSE	i
	ZALYA A, BERLER	平平	
	1970 NE 153RD ST. BAY # 14	08 4 75 3: 75	
	P.O. Box NOT acceptable NORTH MIAMI BEACH, FL 33162	DA A	
The street addresses changed will	ess of its registered office and the street address of the business office of its re	gistered agent.	
	authorized authorized and in a straight adopted by its board of directors or by an off board, or a straight and in writing of the change.		
	ZAYLA A. BERLEF re or an oil a for director. Printed on typed name and title	3	
hereby officept I furthe free in of my duties, and	the appointment as registered agent and agree to act in this capacity, to conjuly with the provisions of all statutes relative to the proper and completed // familiar with accept the obligation of my position as registered aging fred merely to the confice address. I hereby to the project of the confice address. I hereby to the project of the confice address. I hereby to the project of the proper and complete address. I hereby the project of the proper and complete address. I hereby the project of the project		
corporation has	08-27-09		
off of signing	thalf of an entity:		
Tr.	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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