## F07000002222

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2007 JUN 15 AM 4: 0

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SURJECT: FORGEX CORP.	
OCDOECI.	Corporation)
DOCUMENT NUMBER: F07000002222	
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
STEVEN M. HUNT	
(Name of Co	ontact Person)
FORGEX CORP.	
(Firm/C	Company)
3225 MCLEOD DR #110	
(Add	dress)
LAS VEGAS NV 89121	
(City/State a	and Zip Code)
For further information concerning this matter, please	call:
STEVEN M HUNT	at ( 970 ) 769-3330  (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Depart	rtment of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of $\_$	NEVADA	
in order	r to change its registered office or i	registered agent, or both, in the State of Fl	lorida.	
1. The name of the	he corporation: FORGEX CORP			
2. The principal	office address: 3225 MCLEOD DR	RIVE #110, LAS VEGAS, NV 89121	· · · · · · · · · · · · · · · · · · ·	
3. The mailing a	ddress (if different): SAME AS AE	BOVE		
4. Date of incorp	oration/qualification: 4/25/2007	Document number: F070000	02222	
5. The name and Florida Depart		ered agent and registered office on file with	h the	
	CHERYL R HUNT	·····	_	
	10419 LA MIRAGE CT		_	
•	TAMPA, FL 33615	···		
6. The name and (if changed):	street address of the new registered	d agent (if changed) and /or registered offi	2007 JUN 1 SECRETAI	
	STEVEN M HUNT		IUN I	=
	10419 LA MIRAGE CT		SEE SEE	
	(P.O. Box NOT acc	eptable)	AM 4: DF STA JFLOR	O
	TAMPA, FL 33615		ATE ORIO	
The street address changed will	ss of its registered office and the sbe identical.	street address of the business office of its	s registered agent	, •
Such change wa authorized by	s authorized by resolution duly ac e board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so	
	WIX	STEVEN M. Hu		
` •	the appointment as registered age o comply with the provisions of al d I am familiar with and accept th ng filed merely to reflect a change been notified in writing of this ch	Printed or typed name and to ent and agree to act in this capacity. Il statutes relative to the proper and com ne obligation of my position as registered e in the registered office address, I hereb nange.	•	e is e
135	ulf	6 - 13-07 (Date)		
(Sig	nature of Registered Agent)	(Date)	<del></del>	
If signing on bel	nalf of an entity:			
(T)	yped or Printed Name)			

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