## F0800000000406

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
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(Business Entity Name)							
(Document Number)							
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12 JUN 22 AM 8: 38

SECRETARY OF STATE

R.A.

JUN 2 5 2012

T. BROWN

## **COVER LETTER**

TO: Amendment Section Division of Corporations							
SUBJECT: Leviathan International Corporation  Name of Corporation							
DOCUMENT NUMBER: F0800000406							
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:							
Alejandra Price, Paralegal							
Name of Contact Person							
Gutierrez & Associates, PL							
Firm/Company							
1200 Brickell Ave, Ste. 350 Address							
A table 33							
Miami, FL 33131 City/State and Zip Code							
City/State and Zip Code							
assistant@martlaw.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Alejandra Price, Paralegal at 305 577-4500  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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	ange is submitted for a co	orporation organize	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Stat	te of New Y		
	•	<u> </u>	onal Corporation 4th Floor, Aventura, F	FL 33180		
3. The mailing a	address (if different): 20	Jay Street #35	6, Brooklyn NY 11201			
4. Date of incorporation/qualification:		1/28/2008	8 Document number: F08		8000000406	
	d street address of the cur tment of State: (If resign		nt and registered office on f	ile with the		
	Gutierrez & Assoc	iates, PL				
	200 S. Biscayne B	oulevard. Suite	3810			, c pr 8.
	Miami, FL 33131				72	ISIAIC Jas,
6. The name and (if changed):	I street address of the ne	w registered agent (	(if changed) and /or register	ed office	12 JUN 22	RETARY
	Gutierrez & Assoc	iates, PL			2	35 P
	1200 Brickell Ave.	Ste. 350			ဆ္	STAI )RAI
		P.O. Box NOT a	cceptable	<del></del>	œ	₹ 2 1
	Miami, FL 33131	<u>-</u>				· 19
The street addre	ess of its registered office be identical.	ce and the street ad	ldress of the business offic	e of its registe	ered ag	gent,
Such change wanthorized by the	as authorized by resolut	ion duly adopted b	by its board of directors or fied in writing of the chang	by an officer,	String	
POO			700	A Acons	A S	AHHAMAHAMA
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as reg the appointment as reg to comply with the prov ad I am familiar with an ing filed merely to refle s been notified in writin	ristered agent and isions of all statute d accept the oblige ct alchange in the i g of this change.	Printed or typed name agree to act in this capacities relative to the proper an ation of my position as regregistered office address, I	ty. The state of t	erform or i	ance f this t the
1 (Enal	anatur of Kapistered Agent	<u> </u>	6-19-12 Date	<u> </u>		_
If signing on be	chalf of an entity:					
	enaldy J. Gutierrez Typed or Printed Name					

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