

F10000000472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

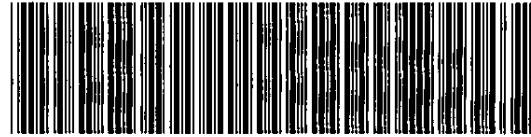
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

JUN - 9 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: InfoSpi Inc
Name of Corporation

DOCUMENT NUMBER: _____

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Haim mayan
Name of Contact Person

InfoSpi Inc
Firm/Company

1720 Harrison St
Address

Hollywood Florida
City/State and Zip Code

haim@mayangroup.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Haim Mayan at (954) 274-0551
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:
InfoSpi, Inc
2. This entity was authorized to transact business in Florida on 01/27/2010 and its Florida document number is F10000000472
3. This corporation was formed under the laws of Nevada
4. The name and address of each officer and/or director is as follows:

Title:
director

Name and Address
Haim Mayan

Signature of an officer or director

Haim Mayan

Typed or printed name of person signing

Director

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314