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COVER LETTER

TO: Amendment Section

Division of Corporations

_{SUBJECT:} Newterra, Inc.

F11000000179

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:

Donna Bertucci

Name of Contact Person

Corporate Direct, Inc

Firm/Company

2248 Meridian Blvd. Suite H

Minden, NV 89423

City/State and Zip Code

info@corporatedirect.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Bertucci

Cashing 15

Name of Contact Person

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

CR2E045 (03/12)

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 Statutes, this ange is submitted for a corporation organized under the laws of the State of Nevada er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: NEWTERRA INC
2. The principal	office address: 2248 MERIDIAN BLVD, SUITE H N, NV 89423
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 01/10/2011 Document number: F11000000179
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Gerri Detweiler
	1037 GREYSTONE LANE
	SARASOTA, FL 34232
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	REGISTERED AGENTS INC.
	3030 N. Rocky Point Drive, STE 150A
	Tampa, FL 33607
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or be an officer so he board, or the corporation has been notified in writing of the change.
	we Distutce Donna Bertucci Printed or typed name and title
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	Bee 12/08/2016
Sig	nature of Registered Agent Date
If signing on be	chalf of an entity:
	e/Assistant Secretary
T	'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 (03/12)

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