F12000002834

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-▼ (Ad	dress)		
(· · · ·	41030)		
(Address)			
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(Cit	y/State/Zip/Phone	#)	
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☐ PICK-UP	☐ WAIT	MAIL	
			
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Certified Copies	Certificates	of Status	
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Vibe Micro, Inc.			
Additional Conformation			
DOCUMENT NUMBER: F12000002834			
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:			
Mr. Delgado			
Name of Contact Person			
Firm/Company			
829 W. Palmdale Blvd #68			
Address			
Palmdale, CA 93551			
City/State and Zip Code			
ihfein2011@gmail.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Mr. Delgado Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Number			
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 Street Address: Amendment Section			
Division of Corporations Division of Corporations			

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

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

-	•	7.0302, 607.1308, or 617.1308, Florida Statutes, this organized under the laws of the State of Nevada
	· · · · · · · · · · · · · · · · · · ·	registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Vibe Micro, In	C.
2. The principal	office address: 20900 NE 30th	h Ave, Suite 200, Aventura, FL 33180
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 07/06/20	12 Document number: F12000002834
	street address of the current registement of State: (If resigned, enter re	ered agent and registered office on file with the esigned)
	REGISTERED AGENT S	SOLUTIONS, INC
	155 Office Plaza Dr., Sui	te A
	Tallahassee, FL 32301	15 S
6. The name and street address of the new registered agent (if changed) and /or registered office. (if changed):		
	Northwest Registered Ag	gent LLC Ste 150 A Ste 150 A
	3030 N. Rocky Point Dr,	
	Tampa, FL 33607	ox NOT acceptable
The street addre	ess of its registered office and the s be identical.	street address of the business office of its registered agent,
^		lopted by its board of directors or by an officer so en notified in writing of the change.
100		Evan Berger
Signatu	re of an officer or director	Printed or typed name and title
I juriner agree i performance of	to comply with the provisions of all my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I fied in writing of this change.
Tont	1_	09/10/2015
Sign	nature of Registered Agent	Date
If signing on be	half of an entity:	
Tom Glover-	- Assistant Secretary	
T	ped or Printed Name	