## P12000003736

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            |             |
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| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | isiness Entity Nar | ne)         |
| (Document Number)       |                    |             |
| Certified Copies        | _ Certificates     | s of Status |
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## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |
|---|
| SUBJECT: GOST - EXPERT INC.  Name of Corporation  |
| DOCUMENT NUMBER: F 1200000 3736   |
| 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:                     |
| Denis Bardykin Name of Contagt Person   |
| GOST - EXPERT Firm/Company  |
| 1000 Fifth Street Suite 200-02  |
| Miami Beach, FL, 33139  City/State and Zip Code   |
| INFO @ GOST - EXPERT. COM  E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call:                                  |
| DENIS CONTACT Person at (   |
| 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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of  |
|---|
| in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation:  GOST - EXPERT INC.  |
| 2. The principal office address: 1000 Fiph Sheet, Suite 200-02  |
| Miami DEach, PL/33/39   |
|   |
| 3. The mailing address (if different):  |
| 4. Date of incorporation/qualification: 09 10 2012 Document number: F13 000003736   |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  |
| Denis Bardykin  |
| 429 Lenox Ave, soite AW 25  |
| Miami Deach, FUI 33139  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   |
| Denis Dardykin  |
| 1000 Firth Street, Suite 200-02   |
| Mami Deach, FL, 33139   |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.  |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.   |
| Signature of anothicer or director  Dents bardy win  Printed or typed name and hile   |
| I hereby accept the appointment as registered agent and agree to act in this capacity.<br>I further agree to comply with the provisions of all statutes relative to the proper and complete<br>performance of my duties, and I am familiar with and accept the obligation of my position as registered<br>agent. Or, if this document is being filed merely to reflect a change in the registered office address. I<br>hereby confirm that the corporation has been notified in writing of this change. |
| Signature of Registered Agent Date  |
| If signing on behalf of an entity:  |
| Typed or Printed Name   |
| * * * FILING FEE: \$35.00 * * *   |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)