## F12000004343

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e.#)
(OII	y oldorzipii non	~,
PICK-UP	MAIT	MAIL
- (Bu	siness Entity Ñar	ne)
(50	isiness Emily Hai	ne,
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



900296044119

03/06/17--01044--020 \*\*35.00

2017 HAR -6 PM 5: 21

V HERRING MAR - 8 2017

## COVER LETTER

TO: Amendment Section Division of Corporations SEBIX INTERNATIONAL MONEY TRANSFER, INC. Name of Corporation F12000004343 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: Heloisa Fontes Name of Contact Person SEBIX INTERNATIONAL MONEY TRANSFER, INC. Firm/Company 5 Franklin Commons Framingham, MA 01702 City/State and Zip Code hfontes@sebixtransfer.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Heloisa Fontes Area Code & Daytime Telephone Number 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

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of Florida.		_
	the corporation: SEBIX INTERNATIONAL MONEY TRANSFER		
	office address: 5 FRANKLIN COMMONS - FRAMINGHAM, MA		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 10/23/2012	343	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	MICHELE HOLDEN		
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION, FL 33324	2017 HAR	7775E
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	ĀR -6	93 Jtc #6 X871.38
	FERNANDO C NAVARRO	P	- इ.स.च १५
•	7250 S KIRKMAN ROAD # 104	2: 5	<u>とき</u> なこ
	P.O. Box NOT acceptable ORLANDO, FL 32819		<b>3</b> 1.
The street address changed will	ess of its registered office and the street address of the business office of its registe be identical.	ered age	ent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer board or the corporation has been notified in writing of the change.	so	
Signor	re of an Affector Printed or typed name and title		_
I hereby accent	the appointment as registered agent and agree to act in this capacity. The complexity 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 regist document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	istered ess, I	
	nature of Revisered Avent		_
	half of an entity:		
fearm so	NAVACEO pped or Printed Name		

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