平130000033604

(Re	equestor's Name)		
(Address)			
(Ac	idress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
_			

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 6, 2016

Order#: 922171-045

Re: ECOSMART GREEN ENERGY PRODUCTS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	ange is submitted for a corporation org	302, 607.1308, or 617.1308, Florida Statutes, this ganized under the laws of the State of Delaware gistered agent, or both, in the State of Florida.
	the corporation: ECOSMART GREEN	•
		h Court, Suite 103, 1st Floor, Mlami Gardens, FL 33016
3. The mailing	address (if different):	
4. Date of incom	rporation/qualification: 08/22/2013	Document number: F13000003604
	nd street address of the current registere artment of State: (If resigned, enter resig	d agent and registered office on file with the gned)
	C T Corporation System	21
	1200 South Pine Island Road	
	Plantation, FL 33324	
6. The name an (if changed):		gent (if changed) and /or registered office
	1201 Hays Street	
		OT acceptable
	Tallahassee	FL 32301
_		ted by its board of directors or by an officer so notified in writing of the change.
~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ure of an officer or director	Scott Bates, Vice President & Secretary Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if the accept confirm	t the appointment as registered agent (and agree to act in this capacity. atutes relative to the proper and complete accept the obligation of my position as registered effect a change in the registered office address. I
By: Silu	in august	01/06/2016
	gnature of Registered Agent	Date
if signing on be	ehalf of an entity:	
	t, Asst. Vice President yped or Printed Name	
,	••	EE: \$35.00 * * *
	I ALAINO I	ALL WEDITO

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