

FR000000531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

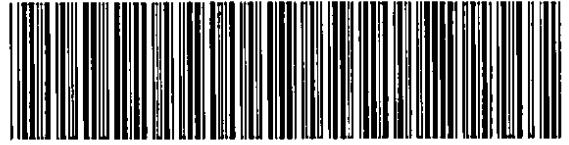
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUL 09 2018
S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pure Debt Solutions Corporation
Name of Corporation

DOCUMENT NUMBER: F18000000531

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:

Mindi Gruby
Name of Contact Person

Pure Debt Solutions Corporation
Firm/Company

1665 Palm Beach Lakes Blvd Suite 200
Address

West Palm Beach, FL 33401
City/State and Zip Code

mindigruby@puredebt solutions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mindi Gruby at (954) 861-8977
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
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 WY in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: PURE DEBT SOLUTIONS CORPORATION
2. The principal office address: 1665 Palm Beach Lakes Boulevard Suite 200 West Palm Beach, FL 33401
3. The mailing address (if different):

4. Date of incorporation/qualification: 01/31/2018 Document number: F18000000531

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)

Brendan Sullivan (resigned)
1665 Palm Beach Lakes Boulevard Suite 200
West Palm Beach, FL 33401

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Mindi Gruby
1665 Palm Beach Lakes Boulevard Suite 200
West Palm Beach, FL 33401
P.O. Box NOT acceptable

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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]
Signature of an officer or director

Gustav Renny
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

6/15/18
Date

If signing on behalf of an entity:

Mindi Gruby
Typed or Printed Name

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