L10000074438

	Requestor's Name)					
,	,					
(/	Address)					
(Address)						
	City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL				
(I	Business Entity Name)					
(Document Number)						
Certified Copies	Certificates of	Status				
Special Instructions to Filing Officer:						

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2011 FEB -J PM : 44
SECRETARY OF STATE:

C. LEWIS
FEB -2 2011
EXAMINER

COVER LETTER

■ TO: ** Registration Section Division of Corporations

SUBJECT:	TECHWISE LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registere	ed Agent/Registered Of	ffice C	hange and	fee(s) are	e submitted for filin	ıg.
Please return all corres	pondence concerning th	his ma	tter to the	following	g:	
YA	SSER VARGAS					
	Name of Person					
TE	ECHWISE LLC					
	irm/Company					
9135 S	W 227th ST UNIT 5					
	Address					
CUTLE	ER BAY / FL 33190					
City/	State and Zip Code					
YVARGA E-mail address: (to be us	AS@TECH-YS.COM ted for future annual report not	tification)			
For further information concerning this matter, please call:						
YASSER		at (786)		210-0148	
Name of P	erson		Area (Jode & Day	vtime Telephone Number	
	RIER ADDRESS:		MAILING ADDRESS:			
Registration Sect			Registration Section Division of Corporations			
Division of Corp Clifton Building	orations		P.O. Box 6327			
2661 Executive (Center Circle		Tallahassee, Florida 32314			
Tallahassee, Flor			Tarianassee, Fiorida 52517			
Enclosed is a check for the following amount:						
\$25 Filing Fo	ee	[\$55 Fil	ling Fee	& Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	TECHWISE LLC			
2. (a) Principal office address of limited liability company:	8430 SW 8th ST			
(Note: MUST BE STREET ADDRESS)	MIAMI FL .33144			
(b) Mailing address of limited liability company:	8430 SW 8th ST			
(Note: MAY BE POST OFFICE BOX)	MIAMI FL .33144			
07/15/2010 3. Date of filing/registration in Florida it decreases 41 = 124	L10000074438			
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept of State:			
Registered Agent:	YASSER VARGAS			
Registered Office Address:	8430 SW 8th ST 210 PS PA			
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:			
NEW Registered Agent:				
	9135 SW 227th ST #5 CUTLER BAY ,FL_33190			
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited			
Signature of a member or authorized representative of a member				
YASSER VARGAS Printed or typed name of signee				
I hereby accept the appointment as registered agent and agreement with the provisions of all statutes relative to the propand I am familiar with and accept the obligations of my posi Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company is Signature of Registered Agent	ree to act in this capacity. I further agree to per and complete performance of my duties, tion as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.			
Division of Corporations, P.O. Box 632	7. Tallahassee, FL 32314			

FILING FEE: \$25.00