

N150000012336

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Nugame Movement Incorporated
Name of Corporation

DOCUMENT NUMBER: N15000001336

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:

Kevin Soto

Name of Contact Person

Nugame Movement

Firm/Company

621 nw 8th avenue

Address

Pompano Beach, Florida 33060

City/State and Zip Code

nugamemvmt@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Soto

Name of Contact Person

at (954) 918-0565

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Nugame Movement inc
2. The principal office address: 621 nw 8th avenue Pompano Beach, Florida 33060

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02-08-2015 Document number: N15000001336

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)

256 nw 79th terrace Margate, FL 33063

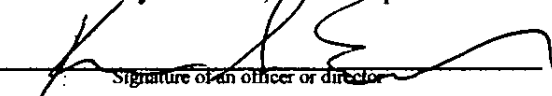
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

621 nw 8th avenue pompano bch, florida 33060

P.O. Box NOT acceptable

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 an officer or director

Kevin Soto

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.

1-25-2017

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

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TALLAHASSEE, FL 32314
FILING