Division of Corporations Electronic Filing Cover Sheet

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REGISTERED AGENT CHANGE INNOVA TECHNOLOGIES INC.

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May 2, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

INNOVA TECHNOLOGIES INC. P.O. BOX 669174 MIAMI, FL 33136

SUBJECT: INNOVA TECHNOLOGIES INC.

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Tina Roberts
Regulatory Specialist II

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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 Plorida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Innova Technologies Inc.
2. The principal office address: 10505 N.W. 274 street Suite 2
Dorai, FC 33172
3. The mailing address (if different): P.O. Box 669 174
<u> </u>
4. Date of incorporation/qualification: 01/14/2000 Document number: P000000 4883
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)
tothan Horards, Pluc
IIIO Brickell Avenue #430
Miami, FL 33136
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
P.A. Gaitan, P.A.
1110 Brickell Avenure #407
Miami, FL 33131
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 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 of Registered Agent Date
if signing on behalf of an entity:
Pater IA. Gartan
Typed of Triffed (white
*** FILING FEE: \$35.00 *** — Payed on line. Please Make Checks Payable to Florida Department of State
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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