## P0000d11535

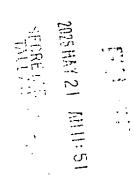
(Red	questor's Name)			
(Add	dress)			
(Add	iress)			
(City	//State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





300451302073

05/21/25--01020--002 \*\*35.00



SB Allalones

## . COVER LETTER

Amendment Section Division of Corporations		
SUBJECT: Powerson Technologies Name of Corporation	ine	
DOCUMENT NUMBER: P0000X	0111535	
The enclosed Statement of Change	of Registered Office/Agent and fee are submitted for filing.	
	oncerning this matter to the following:	
Editi iww.		
Name of Contact Person		
Powersoft Technologies Inc		
<b>гип/</b> Соправу		
8302 SW 193rd ST		
Maniess		
Miami FI 33157	<u>5</u>	2003
City/State and Zip Code		- 13F
esomoano( <i>a</i> ,no	otman.com	منتر الماسة
	uture annual report notification)	21
	active difficult report notification)	******
For further information concerning	this matter, please call:	2025 HAY 21 MAIL: 5
Edith Muniz	2927314067	
Name of Contact Pe	rson Area Code & Daytime Telephone Nu	mher
Enclosed is a \$35.00 check made pa		moei
Mailing Address: Amendment Section Division of Corporal P.O. Box 6327		

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

CR2E045 (04/13)

Taijahassee, FL 52514

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

statement of change is submitte	ections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta d for a corporation organized under the laws of the State of Fig.	orida
	registered office or registered agent, or both, in the State of Flor	rida.
1. The name of the corporation:	10weisor rectinologies inc	
2. The principal office address: Miami FL 33157	8302 SW 193rd Street	<del></del>
3. The mailing address (if differ	ent):	
4. Date of incorporation/qualific	ration: 12/05/2000 Document number: P000001115	35
	of the current registered agent and registered office on the many	_
Eduardo Muniz		
8302 SW 193rd	St	: 25
Miami FL 3315	7	2025 KAY SEURET
o. The name and street address of (if changed):	tine new registered agent (it changed) and (or registered office	高 2
Edith Muniz		
8302 SW 193rd	St	
M: :51 2216	P.O. Box NO1 acceptable	, ~
Miami FL 3315		
The street address of its register as changed will be identical.	ed office and the street address of the business office of its reg	gistered agent.
Such change was authorized by authorized by the board, or the c	resolution duly adopted by its board of directors or by an officerporation has been notified in writing of the change.	cer so
Signature of an officer or direct	tor Edition Municipality	PTVD
i nereny accept the appointment I further agree to comply with the of my duties, and I am familiar y document's being filed merely to corporation has been notified in	as registered agent and agree to act in this capacity, the provisions of all statutes relative to the proper and complet with and accept the obligation of my position as registered ago reflect a change in the registered office address. I hereby cowriting of this change.	e performance ent. Or, if this onfirm that the
Signature of Registered As	511912	<u></u>
If signing on behalf of an entity:		
Typed or Printed Name	K	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)