P.01000106345

TO: Amendment Section Division of Corporations COLLARY TO STORY
SUBJECT: SMAYL' SOLUXIONS, LNC. (Name of corporation)
DOCUMENT NUMBER: PO100106345
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:
MICHAEL S. HERMAN == 50000815-4775-012
*****35.00 *****35.00 (Name of firm/company)
14707 South Dixie Hwy Suite 211
Miami FL 33176 (City/state and zip code)
For further information concerning this matter, please call:
Name of person) at (305) 253-5157 (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 409 E. Gaines Street Tallahassee, FL 32399 SECRETARY OF STATE DIVISION OF CORPORATIONS

7007 OCT -2 AM 10: 58

R.A. Charge

10-7-2002

CR2E045(07/02)

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
Trocide in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: SMart! Soluxions, Inc.
2. The principal office address: 14707 Sount DIXIE Hwy, Suite 21/
Miami F2 33176
3. The mailing address (if different): (SAM=)
4. Date of incorporation/qualification: 11/02/2001 Document number: PO1000106349
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE PL 32301-2525
6. The name and street address of the new registered agent (if changed) and /or registered office of schanged: Michael S. Herman S. H
(P.O. Box or personal mailbox NOT exceptable) MIAMI, PL 33176
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, chairman or vice chairman of the board) (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 of file address, I hereby confirm that the corporation has been notified in writing of this change.
(Date)
If signing on behalf of an entity:

Make checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

(Capacity)

(Typed or Printed Name)