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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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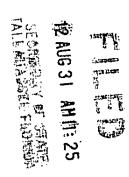
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SEP 0.5 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SKY - MOON, INC. Name of Corporation	
DOCUMENT NUMBER: P 0 2000 1483/	
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:	
HECTOR KUNA Name of Contact Person	
The PrudentiqL INSULANCE Company of AMERIC	Ä
2 Alhambra Plaza Suite 1050	
Copal Gables, FL 33/34 City/State and Zip Code	
h Lun a 135 W Jahoo COM AND hector luna & Audential Co E-mail address: (to be used for future annual report notification)) PL
For further information concerning this matter, please call:	
Mame of Contact Person at (786) 547-12/2 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.
1. The name of the corporation: $8KY - MOON$ INC , 2. The principal office address: $156528.w - 109th$ 196
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/08/2002 Document number: PO20000 148
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) HECFOR LYNA 15652 S.w 109 H Feb. MIGML FL 33196 Sque
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed): 2 ALhambra Paza Suife 1050 Colal Gab/ES, FL. 33134 P.O Box NOT acceptable
The street address of its registered office and the street address of the business office of its registered agents as changed will be flentical.
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. Head
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 Date
It signing on behalf of an entity: HECTER LUNG Type or Printed Name

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