Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000219307 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

. Division of Corporations

Fax Number : (850)617-6380

Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC

Account Number : I20060000012

Phone

: (305)826-5886

Fax Number

: (305)722-0535

REGISTERED AGENT CHANGE

COSMOS UNIQUE EXPRESS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

09/19/08

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

		607.1508, or 617.1508, Florida Statut ed under the laws of the State of FLOF		
		ed agent, or both, in the State of Florid		
1. The name of the corporation: COSMOS UNIQUE EXPRESS, INC.				
2. The principal office address: 2650	S. MILITARY TRAIL,	SUITE # 7, WEST PALM BEACH, FL	33415	
3. The mailing address (if different):				
4. Date of incorporation/qualification	05/28/2002	Document number: P0200005926	53	
5. The name and street address of the Florida Department of State:	current registered age	nt and registered office on file with the	:	
HERNANDEZ, J	AIME			
2650 S. MILITARY TRAIL STE #7		2001 TA		
WEST PALM BE	WEST PALM BEACH, FL 33415		ESE TI	
6. The name and street address of the (if changed):	new registered agent ((if changed) and /or registered office	25E TO 1	
MARTIN ACCO	OUNTING & TAX	SERVICE, INC	H 9: LI	
7678 NW 186 ST			PRIE E	
(FO. Box NOT acceptable)		40		
MIAMI, FL 3301	15	· · · · · · · · · · · · · · · · · · ·		
The street address of its registered of as changed will be identical.	ffice and the street ad	ldress of the business office of its reg	istered agent,	
Such change was authorized by reso authorized by the beard, or the corp	olution duly adopted boration has been notifi	by its board of directors or by an officitied in writing of the change.	er so	
Superior or an onlycer de director)	,	ANDRES ZUNIGA (VPD) (Printed or typed name and title)	<u> </u>	
		agree to act in this capacity, es relative to the proper and complete ation of my position as registered age registered office address, I hereby co	e performance mi. Or, if this nfirm that the	
lallff		09/19/2008		
(Sanalure of Registered Agents If signing on behalf of an entity:) •	(Date)	· · · · ·	
MARTIN COLLANTE				
(Typed or Printed Name)				