

PO2 000085561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

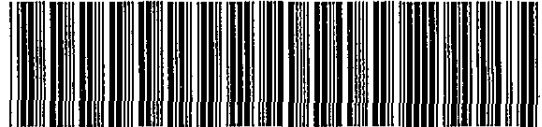
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 APR -4 PM 4:04

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04/04/05--01046--019 \*\*35.00

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Total IT International  
(Name of Corporation)

**DOCUMENT NUMBER:** PO 2000 85561

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dania Triff  
(Name of Person)

Total IT  
(Name of Firm/Company)

11370 SW 26 ST  
(Address)

Miami FL 33165  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dania Triff at (305) 310-3737  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida 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

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Total I.T. International INC.
2. The principal office address: 11370 SW 26 ST  
Miami FL 33165
3. The mailing address (if different): PO BOX 654235  
Miami FL 33265-4235
4. Date of incorporation/qualification: 8/7/2002 Document number: PO2000085561
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Lesser, Karl  
701 Brickell Key Drive  
Miami FL 33131

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**05 APR - 4 PM 4:04**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Trieff, Dania  
2931 SW 19 Terr  
(P.O. Box NOT acceptable)  
Miami FL 33145

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.

Dania Trieff  
(Signature of an officer or director)

Dania Trieff President  
(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.

Dania Trieff  
(Signature of Registered Agent)

3/28/2005  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314