P02000122938

(Requestor's Name)			
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SEP 27 2017

COVER LETTER

TO:

Amendment Section Division of Corporations

ETS USA Holding Corporation

Name of Corporation

P02000122938

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:

Nathan Berman

Name of Contact Person

Corporate Solutions Inc.

Firm/Company

40 SW 13th Street, Suite 804

Address

Miami, Florida 33130

City/State and Zip Code

nathberman@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nathan Berman

Name of Contact Person

MIT SEP 25 AND 24

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

CR2E045 (03/12)

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

		7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida	
		registered agent, or both, in the State of Florida.	-
1. The name of	the corporation: ETS USA Hold	ding Corporation	
		treet 804 Miami, FL 33130	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 11/18/20	02 Document number: P02000122938	
	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	Business Filings Incorpor	rated	
	1200 South Pine Island f		
	Plantation, FL 33324		
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered office	25 d35 Little
	Josefina A Gattei PA		ις 100 ·
	1000 E Hallandale Beach Blvd Suite 28 P.O. Box. NOT acceptable		
	Hallandale Beach, FL 33	1009	AH 10: 24
The street addr	ess of its registered office and the s	street address of the business office of its registered age	
Such change wanthorized by	at authorized by resolution duly ac he board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
X fu	thy tololul	Guillermo Coldesina, Director	_
I hereby accept I further agree performance of agent. Or, if the hereby confirm	• • •	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a chance in the registered office address. I	
1//		05/03/2017	
(Comment	grature of Kegistered Agent	Date	_
Issigning on b	ehalf of an entity:		
	Fyped ox Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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