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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Coast To Coast Equity GRoup, Inc.
DOCUMENT NUMBER: P03000016497
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:
Charles J Scimeca Name of Contact Person
Coast To Crast Equity Group, Inc.
150 SE 2 nd Aue Suite 403 Address
Miami, FL 33131 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles J Scineca at (949) 355-8714 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Amendment Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of change is submitted for a corporation organized under the laws of the State of FLORI da in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Coast To Coast Equity GROUP, INC.
2. The principal office address: 150 SE 2nd Ave Suite 403
M1am1, FL 33131
3. The mailing address (if different):
4. Date of incorporation/qualification: 2-11-2003 Document number: PO 30000 1649
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)
Law Offices of Andrew Coldicutt
1220 Rosecrans Street PMB 258
San Diego, FL 92106
6. The name and street address of the new registered agent (if changed) and /or registered of the control of th
Charles J Scineca 5 5
P.O. Box NOT acceptable
Miami, FL 33131
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.
Chales J Scineca Signature of an officer or director Chales J Scineca 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.
Club J Lamera 12-5-15 Signature of Registered Agent Date
If signing on behalf of an entity:
Charles J Scineca 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 CR2E045 (03/12)