(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·		
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
. (100	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

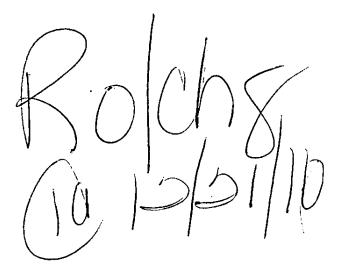
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**35.00



COVER LETTER

	nent Section of Corporations					
SUBJECT:	Figure H	, Inc.				
	Name of C	orporation				
DOCUMENT NUMBER:		P03000133935				
The enclosed Sta	tement of Change of Registered Offic	re/Agent and fee are submitted for filing.				
Please return all	correspondence concerning this matte	r to the following:				
	Andrev	<i>r</i> Haidar				
	Name of Contact Person					
Figure H						
	Firm/Company					
	0000 0 51 1					
		Hwy Ste 305 A				
	Auc	1035				
	Miami E	L 33143				
	City/State a	nd Zip Code				
	0.105					
3d@figureh.com E-mail address: (to be used for future annual report notification)						
For further inform	nation concerning this matter, please	call:				
	Andrew Haidar	at (305) 740 0717				
N	ame of Contact Person	at (305) 740 0717 Area Code & Daytime Telephone Number				
Enclosed is a \$35	.00 check made payable to the Depart	ment 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				
	· withingswey 1 11 5251 F	Tallahassaa El 22201				

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.150 ange is submitted for a corporation organized under er to change its registered office or registered agent,	the laws of the State of	f Florida
1. The name of	the corporation: Figure H, Inc.		
2. The principal	office address: 8603 S Dixie HWY Ste. 305		
Miami FL	33143		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 11-18-2003 Docu	ment number:	P03000133935
	d street address of the current registered agent and re rtment of State: (If resigned, enter resigned)	gistered office on file	with the
	Andrew Haidar		
	4917 SW 74 CT		
	Miomi El 22155		10 C
6. The name and (if changed):	d street address of the new registered agent (if chang	ed) and /or registered of	27 67
	Andrew Haidar	<u> </u>	ORPORATION OF
	8603 S Dixie HWY Ste 305 A		9: 1 -
	P.O. Box NOT acceptable Miami FL 33143		0 15
_	ess of its registered office and the street address of be identical. as authorized by resolution duly adopted by its board, or the corporation has been notified in w		
11		Andrew Haidar	Director
I hereby accept I further agree i of my duties, an document is hei	te of an officer of director the appointment as registered agent and agree to to comply with the provisions of all statutes relative to I am familiar with and accept the obligation of the ting filed merely to reflect a change in the registere to been notified in writing of this change.	Printed or typed name an	d title
1-11-		Date	
		Date	
Ayoung its	chalf of an entity:		
Ty	yped or Printed Name		

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