## P03000[3449]

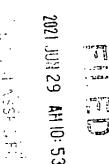
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## COVER LETTER

TO: Amendment Section Division of Corporat	tions		
SUBJECT: RELIANCE IMP Name of Corporation	EX., INC		
DOCUMENT NUMBER:	P03000134491		
The enclosed Statement of C	hange of Registere	ed Office/Agent and fee are submitted for filing.	
Please return all corresponde	ence concerning thi.	is matter to the following:	
PASCAL BASTIAN			
Name of Contact Person			
RELIANCE IMPEXINC			
Firm/Company			
8101 BISCAYNE BLVD, SUT	TE 516		
Address		<del></del>	
MIAMI, FLORIDA 33138			
City/State and Zip Code			
PBAST	IAN@RISSANTI.US	S	
E-mail address: (to be use	d for future annua	al report notification)	
For further information conc	erning this matter,	please call:	
PASCAL BASTIAN		at (407 ) 8886863 Area Code & Davtime Telephone Number	
Name of Con	itaet Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check r	nade payable to the	e Department of State.	
Mailing Addre	Mailing Address: Street Address:		
<u>Mailing Addre</u> Amendment S	ection	Amendment Section	
Division of C	•	Division of Corporations	
P.O. Box 632	P.O. Box 6327 The Centre of Tallahassee		
Tallahassee E	ii 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

CR2E045 (04/13)

## \* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	11177 1 4 5 1 7 1 1	fice or registered agent, or both, in the State of Florida.  AMPEX.ANC
2. The principal	the corporation: RELIANCE office address: 8101 BISCA DA 33138	YNE BLVD. SUITE 516
MIAMI, FLORI	DA 33138	
3. The mailing a	nddress (if different):	
4. Date of incor	poration/qualification; 11/18	Document number: P03000134491
	d street address of the curren rtment of State: (If resigned,	t registered agent and registered office on file with the enter resigned)
	SUSHIL GIDWANI	
	8101 BISCAYNE BLVD, S	UITE 516
6. The name and (if changed):	d street address of the new re	egistered agent (if changed) and /or registered office
	PASCAL BASTIAN	
	8101 BISCAYNE BLVD. SI	UITE 516
		P O Box NOT acceptable
	MIAMI, FLORIDA 33138	
The street addreas changed will	ess of its registered office a be identical.	nd the street address of the business office of its registered agent.
Such change wa authorized by the	as authorized by resolution he board, of the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.
		PASCAL BASTIAN
•	re of an officer or director	Printed or typed name and title
l turther agree of my duties, ar document is bei	the appointment as registe to comply with the provision of am familiar with and acong filed merely to reflect a been notified in writing of	red agent and agree to act in this capacity.  ns of all statutes relative to the proper and complete performance scept the obligation of my position as registered agent. Or, if this change in the registered office address, I hereby confirm that the this change.
		JUNE 25,2021
<del>- 3i</del> g	milite of Registered Agent	Date
If signing on be	chalf of an entity:	
Т	'yped or Printed Name	

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