

PD500080440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

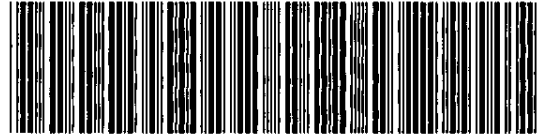
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

2-4-09



000142130030

01/29/09--01007--004 \*\*35.00

PP-As  
Chavez

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JAN 29 AM 10:40

FILED

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CW Solutions Group, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000080440

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:

Cara Webster  
(Name of Contact Person)

CW Solutions Group, Inc.  
(Firm/Company)

5405 NW 102 Ave. #219  
(Address)

Sunrise FL 33351  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cara Webster at 954, 275-1887  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

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

1. The name of the corporation: CW Solutions Group, Inc.  
2. The principal office address: 5405 NW 102 Ave, #219  
Sunrise, FL 33351  
3. The mailing address (if different): Same  
4. Date of incorporation/qualification: 06/03/2005 Document number: P05000080440

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)

Cara Webster  
10242 NW 47 Street, #17  
Sunrise FL 33351

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

Cara Webster  
5405 NW 102 Avenue #219  
(P.O. Box NOT acceptable)  
Sunrise FL 33351

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.

Cara Webster Cara Webster  
(Signature of an officer or director) (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.*

Cara Webster  
(Signature of Registered Agent)

01/27/09  
(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

CR2E045 (8/05)

FILED  
2009 JAN 29 AM 10:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA