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COVER LETTER

Division of Corporations
SUBJECT: 3SC Corp (Name of Corporation)
DOCUMENT NUMBER: <u>005000082719</u>
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:
SARAH VASQUEZ (Name of Contact Person)
3SC CORP. (Firm/Company)
18000 NW 2 Ct. (Address)
Miami FLA 33169 (City/State and Zip Code)
For further information concerning this matter, please call:
SARAH UASQUEZ at (1786) 439-5798 (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

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: 35C Corp.
2. The principal office address: 18000 NW 2 Ct., Miami, FI 3316
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: June 8, 2005 Document number: P0500082719
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
SARAH VASQUEZ / 350 COLD.
911 Michigan Aug Ste 1
Miami Beach F1 33139 20 8
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
3SC Corp. Sarah VASQUEZ
18000 NW 2 Ct. For S.
Miami F1 33169
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.
Sarah Vasouez (Signature of an officer or diffector) Sarah Vasouez (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.
Soft of Vacque 2 2006 (Signature of Registered Agent) 2 (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)