

P06000015541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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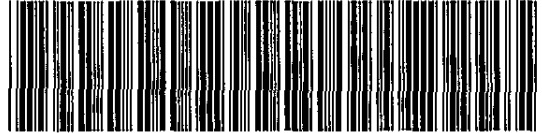
(Business Entity Name)

(Document Number)

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03/28/06--01:04:11--JCL ** 13.19

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONVIAN, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06 0000 15541

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:

Jennie Acosta
(Name of Contact Person)

CONVIAN, Inc.
(Firm/Company)

15811 S.W. 79TH TERRACE.
(Address)

MIAMI, FL. 33193
(City/State and Zip Code)

For further information concerning this matter, please call:

Jennie Acosta/Vivian Balladanes at (305) 388-9067
(Name of Contact Person) (Area Code & Daytime Telephone Number)
(305) 380-9992

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: CONVIAN, INC
2. The principal office address: 15811 S.W. 79 TERRACE
MIAMI, FL. 33193
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/2/2006 Document number: PO6000015541
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Vivian S. Balladarez
13125 SW 64 Terr. #1104
Miami, FL 33183

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

Jennie ACOSTA
15811 S.W. 79TH TERRACE
(P.O. Box NOT acceptable)
Miami, FL. 33193

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.

[Signature]
(Signature of officer or director)

CONCEPCION Balladarez, President
(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.

[Signature]
(Signature of Registered Agent)

3-23-06
(Date)

If signing on behalf of an entity:

Jennie Acosta.
(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)

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06 MAR 28 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA