

PO6 000150907

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: Myriad Minded, Inc.
Name of Corporation

DOCUMENT NUMBER: PO6000150907

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:

Richard DellaFera
Name of Contact Person

Entin + DellaFera
Firm/Company

633 S. Andrews Ave. STE 500
Address

FT Lauderdale, FL 33305
City/State and Zip Code

Kathdf@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen DellaFera at (954) 471 1269
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: Myriad Minded Inc
2. The principal office address: 633 S. Andrews Ave. STE 500

3. The mailing address (if different): 3006 NE 19th ST
FT Lauderdale, FL 33305

4. Date of incorporation/qualification: 12/06/2006 Document number: P06000150907

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)


Richard Della Fera
110 SE 6th ST Ste 1970
Ft. Lauderdale, FL 33301

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

Richard Della Fera
633 S. Andrews Ave. STE 500
P.O. Box NOT acceptable
Ft Lauderdale, FL 33301


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 of an officer or director

Richard F. Della Fera, 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 of Registered Agent

11-12-2015
Date

If signing on behalf of an entity:

Richard F. Della Fera
Typed or Printed Name

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