

P07000021644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

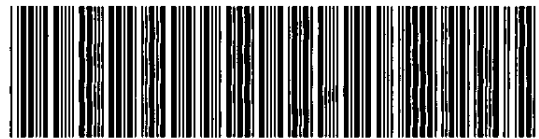
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10 MAR 18 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature and initials, including "Koch" and "3/24".



FLORIDA DEPARTMENT OF STATE
Division of Corporations

COPY

February 24, 2010

VERONICA REINA
SAVVY ORGANIZING SOLUTIONS
3087 MCDONALD ST.
COCONUT GROVE, FL 33133

SUBJECT: SAVVY ORGANIZING SOLUTIONS, INC.
Ref. Number: P07000021644

We have received your document for SAVVY ORGANIZING SOLUTIONS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

AN ALTERNATIVE TO FILING THIS FORM IS TO MAKE THE REGISTERED AGENT CHANGE ON THE CURRENT YEAR ANNUAL REPORT.

To make changes to the officers, directors, or registered agent of the corporation, the current year annual report can be filed. The annual report must be filed online at our website www.sunbiz.org.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 910A00004590

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

RECEIVED
2010 MAR 18 AM 8:00
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Savvy Organizing Solutions, Inc.
Name of Corporation

DOCUMENT NUMBER: P07000021644

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:

Veronica Reina
Name of Contact Person

Savvy Organizing Solutions
Firm/Company

3087 McDonald Street
Address

Coconut Grove, FL 33133
City/State and Zip Code

vlvireina12@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Camila Santana at (786) 545-6227
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 _____
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Savvy Organizing Solutions, INC.
2. The principal office address: 3087 McDonalds Street
Coconut Grove, FL 33133
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2. 19. 07 Document number: P07000021044

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)

Veronica Reina
1900 N. Bayshore Drive #2118
Miami, FL 33132

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

Veronica Reina
3087 McDonald Street
Coconut Grove, FL 33133

P.O. Box NOT acceptable

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.

Veronica Reina
Signature of an officer or director

Veronica Reina / CEO
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.*

Veronica Reina
Signature of Registered Agent

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
10 MAR 18 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA