P0700004890Z

(Re	questor's Name)			
(Ad	dress)			
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(Address)				
				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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Cadillad Canian	Codificator	a of Chabina		
Certified Copies	_ Cenincates	s or Status		
Special Instructions to	Filing Officer:			





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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: IN2SALES, INC Name of Corporation					
DOCUMENT NUMBER: P07000048902					
The enclosed Statement of Change of Registered	l Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
JORGE D BRUNA					
Name of Contact Person					
IN2SALES, INC					
Firm/Company					
12658 SW 120 PL					
Address					
MIAMI, FL 33186					
City/State and Zip Code					
jorgebruna@me.com					
E-mail address: (to be used for future annual	report notification)				
For further information concerning this matter, p	please call:				
JORGE BRUNA	at (305) 2903533				
Name of Contact Person	at (305) 2903533 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	Street Address: Amendment Section Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organiz r to change its registered office or register	ed under the laws of the State of FLO	RIDA
	the corporation: IN2SALES, INC	ou age.m, or bonn, in the state by 1 ton.	
DORAL, FL 331			
3. The mailing a	ddress (if different): 12658 SW 120 PL, M	IAMI, FL 33186	
	poration/qualification: 04/20/2007)2
	I street address of the current registered ag tment of State: (If resigned, enter resigned		ne
	WAYNE RASSNER - RESIGNED		
	7700 N KENDALL DRIVE - SUITE 509		202
	MIAMI, FL 33156		- .
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office	
	JORGE D BRUNA		Ϋ́
	12658 SW 120 PLACE		ت د
	P.O. Box	NOT acceptable	
	MIAMI, FL 33186		
The street address changed will	ess of its registered office and the street a be identical.	ddress of the business office of its re	gistered agent,
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an offi ified in writing of the change.	cer so
		JORGE D BRUNA / PSTD	
	re of all officer or director	Printed or typed name and title	. — , —
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and to comply with the provisions of all statu ad I am familiar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	agree to act in this capacity. tes relative to the proper and comple gation of my position as registered ag registered office address, I hereby c	te performance gent. Or, if this onfirm that the
		APRIL 17/2021	
Sig	plature of Registered Agent	Date	_
If signing on be	chalf of an entity:		
JORGE D BRU		-	
Ť	yped or Printed Name		
	* * * FILING FE	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)