P07000050036

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SECRETARY OF STATE TALLAHASSEE, FLORID,

MAR 1 9 2015 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations Solid Fusion Inc. Name of Corporation P07000050036 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: Steve Antonakakis Name of Contact Person Firm/Company 446 Woldunn Circle Lake Mary, FL 32746 City/State and Zip Code steve.antonakakis@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Steve Antonakakis Name of Contact Person 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 cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of Florida		
		registered agent, or both, in the State of Florida	•	
1. The name of	he corporation: Solid Fusion	Street #4040 Croop Cove Springe		22042
2. The principal	office address: 411 VVainut S	Street #4040, Green Cove Springs,	, FL -	32043
3. The mailing a	ddress (if different):		·· · ·	
4. Date of incorp	poration/qualification: 4/24/200	07	036	
	street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	PRESIDENTIAL SERV	ICES INCORPORATED		
1217 CAPE CORAL PARKWAY #300				
	CAPE CORAL, FL 339	04	1 5	SEC
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered office	15 MAR 16	NETARY AHASSI
	STEVE ANTONAKAKIS	S	PM 12: 2"	H
	446 WOLDUNN CIRCL		2: 2	STAT LORII
	LAKE MARY, FL 32746	Box NOT acceptable		A
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its regis	tered a	igent,
1	1 0 11	dopted by its board of directors or by an officer een notified in writing of the change.		
	May	Steve Antonakakis		
I hereby accept I further agree performance of agent. Or, if th	to comply with the provisions of a	Printed or typed name and title gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as reg to reflect a change in the registered office addr tified in writing of this change.	gistere ess, I	ed
	MAY	3/13/2015		
	half of an antitu	Date		
n signing on be	half of an entity:			
Т	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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