107000093368

(Requestor's Name)	
(Address)	
(Hadicas)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL .
	!
. ' (Business Entity Name)	:
(Document Number)	
Certified Copies · Certificates of	Status
	, ;
Special Instructions to Filing Officer:	

Office Use Only



900163121199

12/02/09--01008--015 **35.00

lo My

09 DEC -2 AH II: 57

SECRETARY OF STATE

w Roberto DEGIO 71 2009

COVER LETTER

TO: Amendment Section Division of Corporat	ions			
SUBJECT:	SDH Interactive	e Corp		
	Name of Corp	poration		
DOCUMENT NUMBER:_	P0700	0003368		
The enclosed Statement of Cl	hange of Registered Office/A	gent and fee are submitted for filing.		
Please return all corresponde	nce concerning this matter to	the following:		
•	-			
	Shertmann Lope Name of Conta	z Falzchuk ct Person		
SDH Interactive Corp				
Firm/Company				
	5702 NW 1			
	Address	S		
	Doral, FL 33178 City/State and Zip Code			
	City/State and 2	Lip Code		
	slopez@sdhintera			
E-mail address: (to be used for future annual report notification)				
For further information conce	rning this matter, please call	:		
Shertmann Lo	nez Falzchuk			
Name of Cont	act Person	at (<u>786</u>) 709-8591 Area Code & Daytime Telephone Numbe		
Enclosed is a \$35.00 check m	ade payable to the Departme	nt of State.		
Ame Divi P.O.	ing Address: ndment Section sion of Corporations Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building		
Talla	hassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

ŧ

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, change is submitted for a corporation organized under the laws of the	
	rder to change its registered office or registered agent, or both, in the a	
1. The name of	of the corporation: SDH INTERACTIVE CORP	
	pal office address: 5702 NW 112 Ct , Doral FL 33178	
3. The mailing a	ng address (if different):	
4. Date of incor	corporation/qualification: August 20,2007 Document number:	P07000093368
	and street address of the current registered agent and registered office opartment of State: (If resigned, enter resigned)	on file with the
	Shertmann Lopez Falzchuk	o
	21 Fleming Ct	
, ,	Weston FI 33326	PEC
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered agent (if changed) agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registe	stered office
	Shertmann Lopez Falzchuk	
	5702 NW 112 Ct	م ـــ
	P.O. Box NOT acceptable	
, , , , , , , , , , , , , , , , , , ,	Doral, FL 33178	
The street address changed will	dress of its registered office and the street address of the business of the b	ffice of its registered agent,
Such change wa authorized by the	was authorized by resolution duly adopted by its board of directors y the board, or the corporation has been notified in writing of the ch	or by an officer so ange.
Signatu	Shertmann Lope Printed or typed Printed or typed	ez Falzchuk - CEO
I hereby accept I further agree of my duties, an document is bei corporation has	ept the appointment as registered agent and agree to act in this cape ee to comply with the provisions of all statutes relative to the proper and I am familiar with and accept the obligation of my position as a being filed merely to reflect a change in the registered office addres has been netified in writing of this change.	aaibu
	November	r 30th, 2009
Sig	Signature of Registered Agent Date	
If signing on be	behalf of an entity:	
	ertmann Lopez Falzchuk Typed or Printed Name	
•	* * * FILING FEE: \$35.00 * * *	•
M	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF S' MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHAS	TATE SEE, FL 32314

CR2E045 (8/05)