

PO7000 112695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

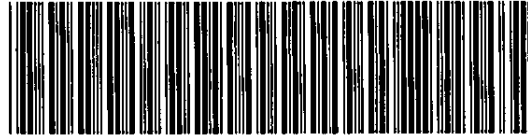
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
15 MAR 23 PM 2:22

MAR 27 2015
T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Interactive Children Education and Entertainment Corp.
Name of Corporation

DOCUMENT NUMBER: PO7000112695

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:

Martin, Santiago P
Name of Contact Person

Interactive Children Education and Entertainment Corp.
Firm/Company

2138 NW Flagler ter Apt #4
Address

Miami FL 33125
City/State and Zip Code

Info @ nutty scientists . com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martin, Santrago P. at (786) 362 1211
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: Interactive Children Education and Entertainment Corp.
2. The principal office address: 2138 NW Flagler ter Apt 4
Miami, FL 33125
3. The mailing address (if different): 2138 NW Flagler ter Apt
Miami, FL 33125
4. Date of incorporation/qualification: 10/12/2007 Document number: P07000112695
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)
Ortiz, Alex 354 Sevilla Ave
Coral Gables, FL
(resigned) 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Shogreen, Cynthia
2138 NW Flagler ter, suite 4
P.O. Box NOT acceptable
Miami, FL 33125

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TALLAHASSEE, FLORIDA

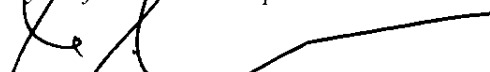
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

SANTILLO MARTIN
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

3/10/15
Date

If signing on behalf of an entity:

Typed or Printed Name

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