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PICK-UP WAIT MAIL					
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DIVISION OF CORPORATIONS

COVER LETTER

TO:	Amendment Sec Division of Cor	ction porations		<u>,</u> 1	
SUBJ	ECT:		ALE INC.		
DOCI	UMENT NUMBE	CR:F	208000089120)*	
The er	nclosed Statement	of Change of Registered (Office/Agent and fee	e are submitted t	for filing.
Please	return all corresp	ondence concerning this n	natter to the following	ng:	
			IME RUIZ f Contact Person		
		name o	Contact Person	٠.	
			F.G. CORP		
		Fin	m/Company		
		10773 N	W 58TH ST #12	, ;#	
			Address	. 19 <u>t</u>	
		MIAN	II, FL. 33178		
City/State and Zip Code					
cindy.shipinc@gmail.com					
	E-m	ail address: (to be used	for future annual r	eport notificati	on)
For fu	rther information	concerning this matter, ple	ase call:		
	Cin	thya Aviles	at (305	<i>5</i>	938-0222
····	Name of	Contact Person			elephone Number
Enclos	sed is a \$35.00 che	eck made payable to the D	epartment of State.		
		Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Ame S Div Clif 266	et Address: endment Sectio ision of Corpor fron Building 1 Executive Ce ahassee, FL 32	rations enter Circle

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

statement of ch	e provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this pange is submitted for a corporation organized under the laws of the State of FLORIDA
	ler to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: ORIGINALE INC. If office address: 9737 NW 41ST #685 MIAMI, FL 33178
	TOTACC MUNICIPAL TOTAL CONTROL OF THE CONTROL OF TH
3. The mailing	address (if different):
4. Date of inco	rporation/qualification: SEP 30, 2008 Document number: P08000089120
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)
	SMALLBIZ AGENTS, LLC
	4244 W. TENNESSEE ST. #185
	TALLAHASSEE, FL. 32304
6. The name an (if changed):	and street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned) SMALLBIZ AGENTS, LLC 4244 W. TENNESSEE ST. #185 TALLAHASSEE, FL. 32304 and street address of the new registered agent (if changed) and /or registered office
	F.S.F.G CORP
	10773 NW 58 ST #12
	P.O. Box NOT acceptable MIAMI, FL 33178
The street addr as changed wil	ress of its registered office and the street address of the business office of its registered agent, ll be identical.
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Qua	White CINTHYA AVILES
Signat	ure of an officer or director Printed or typed name and title
I hereby accep I further agree of my duties, a document is be corporation ha	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this sing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.
	gnature of Registered Agent Date
it signing on b	ehalf of an entity
	JAIMERUIE IN BEHINGOF Typed or Printed Name TSFG GOV.
	* * * 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)

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