

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000158289 3)))



H130001582683ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : G & B INTERNATIONAL CORP.

Account Number : I20130000061 Phone : (239)593-8291

Fax Number : (239) 992-4046

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: 95 - ont amacional Photma: 1.000

REGISTERED AGENT CHANGE G & B INTERNATIONAL CORPORATION

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 01 |
| Estimated Charge | \$52.50 |

Electronic Filing Menu

Corporate Filing Menu

Hcip

7/15/2013

COVER LETTER

| TO: | | ndment Section of Corporation | | | | | |
|-------|-------|-------------------------------|-------------|------------|--------|--------------|-------------|
| SUBJI | ECT:_ | G: 1 | 3 1, | nterr | restic | Mal | Corporation |
| | | | | | | | |
| DOCU | JMEN | T NUMBER | <u>. Po</u> | <u>08€</u> | 000 | <u> १९५५</u> | 72 |

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:

| Saira Builica. | | | |
|-------------------------|--|--|--|
| Name of Contact Person | | | |
| GIB Interactional Corp. | | | |
| Firm/Company | | | |
| 26755 OH 41 Pd # 2 | | | |
| Address | | | |
| Bonita Spring FC 34135 | | | |
| City/State and Zip Code | | | |

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Salva Builica at (23 9, 593829)

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

CR2E045 (03/12)

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

| _ | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this |
|--|--|
| • | nge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of Florida. |
| in orue | |
| 1. The name of t | he corporation: (7:13 International Corporation) |
| 2. The principal | office address: 26755 Old 41 Rd # 2, Benita Springs |
| 3. The mailing a | ddress (if different): |
| | |
| 4. Date of incom | coration/qualification: Document number: P08 0000999 25 |
| | street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned) |
| ٠, | Haragista Candolo |
| | 26755 OH 4 Rd #Z |
| | Brooks Shims FC 24125 FF 7 |
| | To store the store of the store |
| The name and (if changed); | street address of the new registered agent (if changed) and /or registered office |
| (ii changed). | Saira Buritica. |
| | 26755 Old 4 Rd # 2 |
| | P.O. Box NOT societable |
| | Bonita Springs +C 34132 |
| The street address changed will | ess of its registered office and the street address of the business office of its registered agent, be identical. |
| Such change was | as authorized by resolution duly adopted by its board of directors or by an officer so so beard, or the comporation has been notified in writing of the change. |
| and the second | Margatila Candelo - President. |
| (pereby accept | the appointment as registered agent and agree to act in this capacity. |
| - bertormance of | to comply with the provisions of all statuted relative to the proper and complete my dulies, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been natified in writing of this change. |
| - frim | B |
| No. | Dete |
| If signing on be | half of an entity: |
| Saira | yood or Printed Name |
| 7 | Shor or surfices trained |

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