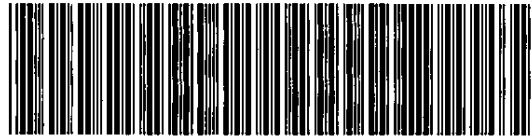


PD9000061359



400185422884

400185422884
09/21/10--01013--006 **35.00

(Requestor's Name)

(Address)

(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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 SEP 21 AM 10:30

Rd/chs
@ 9/22/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ESEMP SOLUTION CORP
Name of Corporation

DOCUMENT NUMBER: P09000061359

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:

LUIS O BEJERANO
Name of Contact Person

Firm/Company

8216 CRESPI BLVD #3
Address

Miami Beach, FL - 33141
City/State and Zip Code

luisbejerano4@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis O Bejerano at (786) 768-7939
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: ESEMP SOLUTION CORP.
2. The principal office address: 820 83rd Street #2
Miami Beach, FL - 33141
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/20/2009 Document number: P09000061359
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)

820 83rd Street #2
Miami Beach, FL - 33141

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LUIS O BEJERANO
820 83rd Street #2 Miami Beach, FL 33141
P.O. Box NOT acceptable

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 SEP 21 AM 10:30

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

Luis O Bejerano - Director

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

09/15/2010

Date

If signing on behalf of an entity:
Luis O Bejerano

Typed or Printed Name

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