

(Requestor's Name) (Address) (Address)	500158337705
	year).
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO:	Amendme Division o	nt Section f Corporations				
SUBJ	ECT:	Your Busine	ess Connexion	n.com, Inc.		
DOC	UMENT NU	MBER:	27-0607	7486		
The e	nclosed State	ment of Change of Regi	stered Office/Agen	t and fee are subm	itted for filing.	
Pleaso	e return all co	orrespondence concerning	g this matter to the	following:		
			Margarita Mayo	orga erson		
		Your Bu	siness Connexi	on.com, Inc.		
	Firm/Company					
	13858 sw 283rd terrace					
			Address			
			Ainmi Florido O	2022		
	Miami, Florida 33033 City/State and Zip Code					
	yourbusinessconnexion@gmail.com E-mail address: (to be used for future annual report notification)					
		E man addition (to be		air roport not	meanom)	
For fu	irther inform	ation concerning this ma	tter, please call:			
		Margarita Mayorga	at (305	246-8883	
	Na	me of Contact Person		Area Code & Day	lime Telephone Number	
Enclo	sed is a \$35.0	00 check made payable t	o the Department of	of State.		
		Mailing Address: Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	orations	Street Address Amendment S Division of C Clifton Build 2661 Executi Tallahassee, I	Section orporations ing ve Center Circle	

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

ursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this atement 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.
The name of the corporation: Your Business Connexion.com, Inc.
The principal office address: 13858 SW 283rd Terrace Miami, Florida 33033
The mailing address (if different): 3900 NW 79TH AVE Doral, Florida 33166-6550
. Date of incorporation/qualification: 7/24/2009 Document number: 27-0607486
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) Margarita Mayorga 7200 sw 114th Place
Margarita Mayorga
Miami, Florida 33173 The name and street address of the new registered agent (if changed) and /or registered office
. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
13858 sw 283rd Terrace
Miami, Florida 33033
P.O Box NOT acceptable
the street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director Margarita Mayorga Printed or typed name and title
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance f my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
Margarita Maryong a 7/31/09 Signature of Registered Agent Date
f signing on behalf of an entity:
Margarita Mayorga Typed or Printed Name

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