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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

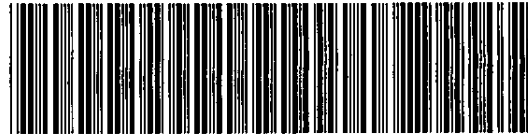
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TO: Amendment Section
Division of Corporations

SUBJECT: WEALTH MAGNET INCORPORATED
Name of Corporation

DOCUMENT NUMBER: P10000011405

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:

Paola Rodriguez
Name of Contact Person

WEALTH MAGNET INCORPORATED
Firm/Company

11320 NW 43 TE.
Address

Doral, FL 33178
City/State and Zip Code

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

For further information concerning this matter, please call:

PAOLA RODRIGUEZ at (786) 390-2566
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: WEALTH MAGNET INCORPORATED
2. The principal office address: 8660 NW 5 TE. 203 , MIAMI, FL 33122
3. The mailing address (if different): 11320 N W 43 TE. Doral, FL 33178

4. Date of incorporation/qualification: 02/08/2010 Document number: P10000011405

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)

MARITZA TEJADA (Resigned)
TEJADA, MARITZA 8660 NW 5 TE 203
MIAMI FL 33122


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

PAOLA RODRIGUEZ
11320 N.W. 43 TE.
Doral, FL 33178

P.O. Box NOT acceptable

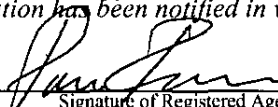
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

MARITZA TEJADA
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

08/03/2011
Date

If signing on behalf of an entity:

Paola Rodriguez
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FL 32314