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SECRETARY OF STATE

COVER LETTER

| Division of Corpo | orations | | |
|-----------------------------|--|--|-------------------------------------|
| SUBJECT: | Leverage Investi | gations, Inc. | |
| DOCUMENT NUMBER | | 000029602 | |
| The enclosed Statement o | f Change of Registered Offic | e/Agent and fee are sul | bmitted for filing. |
| Please return all correspon | ndence concerning this matte | r to the following: | |
| | Ana C. Name of Co | Lanuza ntact Person | |
| | Leverage Inve | stigations, Inc. | |
| | 5901 S.W. 74th Add | | |
| | South Miam City/State ar | ni, FL 33143 nd Zip Code | |
| E-ma | ana@leverageinve | stigationsinc.com uture annual report n | otification) |
| For further information co | oncerning this matter, please o | call: | |
| Ana (| C. Lanuza | at (305) | 342-0108 |
| Name of C | Contact Person | Arca Code & Da | 342-0108 aytime Telephone Number |
| Enclosed is a \$35.00 chec | k made payable to the Depart | ment of State. | |
| A D P | Mailing Address: Amendment Section Division of Corporations CO. Box 6327 Callahassee, FL 32314 | Clifton Bui 2661 Exect | nt Section f Corporations |

CR2E045 (8/05)

TO: Amendment Section

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

| statement of ch | e provisions of sections 607.0502, 617.0502, 607.1508, or 61 nange is submitted for a corporation organized under the law der to change its registered office or registered agent, or both | s of the State of Florida |
|---------------------------------|---|---|
| 1. The name of | f the corporation: Leverage Investigations, Inc. | |
| 2. The principal | al office address: 5901 S.W. 74th Street, Suite 221, | South Miami, FL 33143 |
| 3. The mailing a | address (if different): | |
| 4. Date of incor | orporation/qualification: 04/06/2010 Document n | umber: P10000029602 |
| | nd street address of the current registered agent and registered artment of State: (If resigned, enter resigned) | l office on file with the |
| | Ana C. Lanuza | |
| | 3911 S.W. 67th Avenue | |
| | Miami, FL 33155 | ·· |
| 6. The name and (if changed): | nd street address of the new registered agent (if changed) and : Ana C. Lanuza | /or registered office |
| | 5901 S.W. 74th Street, Suite 221 | Port I |
| | P.O. Box NOT acceptable | Fig. 1 |
| | South Miami, FL 33143 | |
| The street address changed will | ress of its registered office and the street address of the built be identical. | siness office of its registered agent, |
| Such change w authorized by t | was authorized by resolution duly adopted by its board of d the board, or the corporation has been notified in writing of | lirectors or by an officer so f the change. |
| Mer (| Ana Wire of an officer of director Printe | C. Lanuza/President |
| • | of the appointment as registered agent and agree to act in a e to comply with the provisions of all statutes relative to the and I am familiar with and accept the obligation of my pos- eing filed merely to reflect a change in the registered office as been potified in writing of this change. | |
| ana | Lanne | 09/14/2010 |
| Sig | ignature of Registered Agent | Date |
| If signing on be | pehalf of an entity: | |
| | Ana C. Lanuza 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

CR2E045 (8/05)