

P10000032182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

## Certificates of Status

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04/27/10--01013--006 \*\*35.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TB

APR 30 2010

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SURPRIZING YOU Inc  
Name of Corporation

**DOCUMENT NUMBER:** P10000032182

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:

ERMINDA Sanchez  
Name of Contact Person

SURPRIZING YOU Inc  
Firm/Company

10936 NW 7ST #5  
Address

Miami FL 33172  
City/State and Zip Code

esax1913@ADL.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ERMINDA Sanchez at (305) 332-3756  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SURPRIZING YOU Inc
2. The principal office address: 10936 NW 7st #5 - Miami FL  
33172
3. The mailing address (if different): the same
4. Date of incorporation/qualification: 4-12-2010 Document number: P10000032182

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)

Cotto-Sanchez Jessica  
5240 NW 182 St  
Miami-Gardens FL 33055

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

ErminDA Sanchez  
10936 NW 7st #5  
Miami - FL - 33172

P.O. Box NOT acceptable

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FILED

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.

ErminDA Sanchez  
Signature of an officer or director

ERMINDA SANCHEZ  
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.

ErminDA Sanchez  
Signature of Registered Agent

4-20-10  
Date

If signing on behalf of an entity:

ERMINDA SANCHEZ  
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)