P10000056935

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of State	ıs	
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COVER LETTER

TO: Amendment Se Division of Co	ection rporations			
SUBJECT:	FREE EXPERIE	NCE INC		
DOCUMENT NUMB	er: P1000	00056935		
The enclosed Statemen	t of Change of Registered Office/	Agent and fee are submitted for filing.		
Please return all corresp	pondence concerning this matter to	the following:		
SERGIO E. TODISCO Name of Contact Person				
	Name of Conta	et Person		
	•			
FREE EXPERIENCE INC Firm/Company				
	r inip Com	pany		
	c/o 304 PALE	AMO AVE		
	Addres			
	CORAL GABLE	S, FL 33134		
City/State and Zip Code				
jorge@delahozcpa.com E-mail address: (to be used for future annual report notification)				
Е-п	nail address: (to be used for fut	ure annual report notification)		
For further information	concerning this matter, please cal	1:		
JORG	SE DE LA HOZ	305 449 5505		
	f Contact Person	at (305) 448-5585 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 ch	eck made payable to the Departm			
	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		

CR2E045 (8/05)



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2011

SERGIO TODISCO 304 PALERMO AVE CORAL GABLES, FL 33134

SUBJECT: FREE EXPERIENCE, INC

Ref. Number: P10000056935

We have received your document for FREE EXPERIENCE, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 411A00022820

Carol Mustain Regulatory Specialist II

www.sunbiz.org

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: FREE EXPERIENCE, INC	
	office address: c/o 304 PALERMO AVE, CORAL GABLES, FL 33134	
		_
3. The mailing a	address (if different):	_
	poration/qualification: 07/09/2010 Document number: P10000056935	_
5. The name and Florida Depart	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	ALICIA BENITEZ CPA LLC (RESIGNED)	-
	11877 SW 38 TER	
	MIAMI, FL 33175	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	SERGIO E. TODISCO	
	c/o 304 PALERMO AVE	
	P.O. Box NOT acceptable	
	CORAL GABLES, FL 33134	
The street addr as changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	SERGIO E. TODISCO	
_	we bi an officer or director Printed or typed name and title	
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agents or if this ring filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.	
	07/08/201 5 5 0	
810	gnature of Registered Agent Date	
If signing on be	ehalf of an entity:	
	RGIO E. TODISCO	

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