P1000058181

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COVER LETTER

то:	Amendment Section Division of Corporations
SUB	JECT: AGAMINERALS, INC.
	(Name of Corporation)
DOC	CUMENT NUMBER: P10000058187
The c	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
ODI	ELYA HODAYA WILLHIDE BITON
	(Name of Person)
	(Name of Firm/Company)
103	00 WEST FOREST HILL BLVD SUITE 2000
	(Address)
WE	LLINGTON, FL 33414
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
ODE	(Name of Person) at (ACS) A10 - 09 73 (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Division of Corporations Division of Corporations Post Office Box 6327 Tallahassee, FL 32301

6-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 statement of change is submitted for a corporation organized under the limit in order to change its registered office or registered agent, or b	laws of the State of FLORIDA
1. The name of the corporation: AGAMINERALS, INC.	
2. The principal office address: 6552 ARLEIGHT COURT #108	
BOCA RATON, FL 33433	
3. The mailing address (if different): % BERGMAN 7451 W OAK	LAND PARK BLVD STE B
LAUDERHILL, FL 33319	
4. Date of incorporation/qualification: 07/14/2010 Documen	t number: P10000058187
5. The name and street address of the current registered agent and registe Florida Department of State: (if resigned, enter resigned)	red office on file with the
ROEE EINHORN (RESIGNED)	
6. The name and street address of the new registered agent (if changed) a (if changed): A C BERGMAN	nd /or registered office
7451 W OAKLAND PARK BLVD SUITE B	
P.O. Box NOT acceptable	
LAUDERHILL, FL 33319	***************************************
The street address of its registered office and the street address of the last changed will be identical.	
Such change was authorized by resolution duly adopted by its board of authorized by the board, or the corporation has been notified in writing	
	HODAYA WILLHIDE BITON inted or typed name and title
I hereby accept the appointment as registered agent and agree to act i I further agree to comply with the provisions of all statutes relative to of my duties, and I am familiar with and accept the obligation of my p document is being filed merely to reflect a change in the registered off corporation has been notified in writing of this change.	n this capacity, the proper and complete performance osition as registered agent. Or, if this ice address, I hereby confirm that the
Signature of degistered Agent	11/25/2010
	Date
If signing on behalf of an entity:	
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)