

P10000067113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

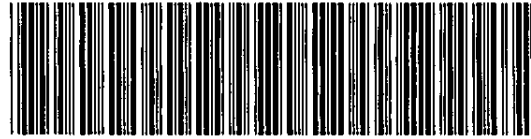
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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OCT 15 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Charge

OCT 16 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

valery wireless corporation

SUBJECT: _____
Name of Corporation
P10000067113

DOCUMENT NUMBER: _____

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:

Michel Cobas

Name of Contact Person

valery wireless corporation

Firm/Company

15065 sw 68 lane

Address

miami fl 33193

City/State and Zip Code

valerywireless@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Cobas

Name of Contact Person

at (**786**) **536-4968**

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 ~~State~~ Florida 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.

Valery Wireless Corp

1. The name of the corporation: 15065 SW 68 Lane
2. The principal office address: _____
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/16/2010 Document number: P10000067113

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)

Michel Cobas

15065 SW 68 Lane

Miami FL 33193

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

Angela R Siam

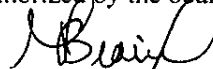
11561 SW 64th St Unit E

P.O. Box NOT acceptable

Miami FI 33173

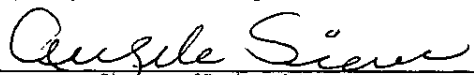
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

10/09/2012
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

10/09/2012
Date
Angela Siam

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 (03/12)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 15 PM 4:00

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