

P110000011285

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUN 19 PM 2:20

JUN 21 2013

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABK US Services Inc
Name of Corporation

DOCUMENT NUMBER: P1000011285

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:

Valentina Naumenko
Name of Contact Person
ABK US Service Inc
Firm/Company
3501 W Vine St Ste 358
Address
Tallahassee 32301, FL
City/State and Zip Code
MAKURINII@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valentina Naumenko at (407) 483-8847
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ABX US Services, INC
2. The principal office address: 3501 W Vine St Ste 338
KISSIMMEE 34741
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/18/2011 Document number: P11000011285

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)

ELENA KOTCHINA
50 LEANN WAY UNIT E6
PALM BEACH FL 32137

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

1608 MAKURIN
3501 W VINE ST STE 338
KISSIMMEE 34741 FL

P.O. Box NOT acceptable

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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.

MAKURIN
Signature of an officer or director

1608 MAKURIN, Vice President
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.

MAKURIN
Signature of Registered Agent

6/14/13
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 (03/12)