



**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JUVENESCENCE MANAGEMENT INC  
Name of Corporation

**DOCUMENT NUMBER:** P11000016873

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:

Sean Oppen  
Name of Contact Person

Juvenescence Management ~~INC~~  
Firm/Company

301 W41st St Suite 302  
Address

Miami Beach, FL 33140  
City/State and Zip Code

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

For further information concerning this matter, please call:

sean oppen at ( 305 ) 2051259  
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Juvenesence Management Inc

2. The principal office address: 301 W41st St Suite 302  
Miami Beach, FL 33140

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 02/17/2011 Document number: P11000016873

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)

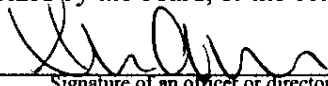
Sean M Oppen  
321 191st St  
Sunny Isles Beach, FL 33160

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

Sean M Oppen  
301 W41st St Suite 302  
P.O. Box NOT acceptable  
Miami Beach, FL 33140

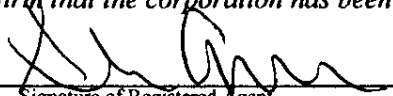
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Sean Oppen  
\_\_\_\_\_  
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

August 20, 2012  
\_\_\_\_\_  
Date

If signing on behalf of an entity:  
Sean Oppen  
\_\_\_\_\_  
Typed or Printed Name

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

