| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Ви | siness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| Division of Corporations | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| SUBJECT: Moving On International Name of Corporation | | |
| DOCUMENT NUMBER: P 110000 22 859 | | |
| 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: | | |
| Ann Steinke Name of Contact Person | | |
| | | |
| Moving On International Firm/Company | | |
| 200 Carolina Ave #204 | | |
| Winter Park FL 32779 City/State and Zip Code | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: And Steinkl Name of Contact Person at 407 6/7-4866 Area Code & Daytime Telephone Number | | |
| 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 Street Address: Amendment Section | | |

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 | | |
| in order to change its registered office or registered agent, or both, in the State of Florida. | | |
| 1. The name of the corporation: Moving On International for | | |
| 2. The principal office address: 200 Carolina Ave #204 | | |
| Winter Park, FL 32779 | | |
| 3. The mailing address (if different): | | |
| | | |
| 4. Date of incorporation/qualification/March 7, 2011 Document number: P11000022859 | | |
| 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) | | |
| Kathleen Sink | | |
| 722 Granville Dr. | | |
| Winter Park Fl 32789 | | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | | |
| Kathleen Sink | | |
| 200 Carolina Ave #204 37 % | | |
| Winter Park F1 22189 For | | |
| 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 obsider of division An Stein Ke | | |
| 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. | | |
| Xathles L. Sink 10/25/12 Signature of Registered Agent Date | | |
| If signing on behalf of an entity: | | |
| | | |

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

Typed or Printed Name