

P11000039225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

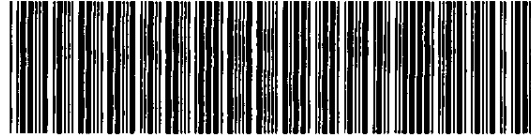
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900207564189

05/16/11--01038--014 **35.00

FILED
11 MAY 16 PM 2:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

BO Charge
Thurs
5-24-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sharkadabra Inc.
Name of Corporation

DOCUMENT NUMBER: P11000039225

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:

Alberto Carnevale-Miino
Name of Contact Person

Sharkadabra Inc.
Firm/Company

17206 Newport Club Drive
Address

Boca Raton, FL, 33496
City/State and Zip Code

alberto.carnevale@protiviti.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alberto Carnevale-Miino at (561) 809 1592
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: Sharkadabra Inc.
2. The principal office address: 17206 Newport Club Drive, Boca Raton, FL, 33496
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: April 22, 2011 Document number: P11000039225
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)

Alberto Carnevale-Miino

6554 NW 42nd Way, Boca Raton, FL, 33496

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

Alberto Carnevale-Miino

17206 Newport Club Drive

P.O. Box NOT acceptable

Boca Raton, FL, 33496

FILED
11 MAY 16 PM 2:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

Alberto Carnevale-Miino

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

May 12, 2011

Date

If signing on behalf of an entity:

Alberto Carnevale-Miino / Sharkadabra

Typed or Printed Name

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

2/2