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MAY 27 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FINGAN SERVICES /NC Name of Corporation
DOCUMENT NUMBER: P 11000053859
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:
STEVEN TRYING Name of Contact Person Firm/Company PO BOX 466 Address Venus FL 33960 City/State and Zip Code STEVE & GETFINBAR, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Steven Rv/No- at 954 684 5095 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: FINBAR SERVICES INC
2. The principal office address: 43 Gobbel Romo Venus FL 33960
3. The mailing address (if different): P.O. Box 466 Venus FC 33960
4. Date of incorporation/qualification: 06/08/2011 Document number: P110000 53858
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)
Conporation Service Co.
1201 HAYS STREET
TALLAHASSEE FL 32301 :
6. The name and street address of the new registered agent (if changed) and /or regis (if changed): STeven IRVING
43 Gobbel Rd P.O. Box NOT acceptable
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 of the cornoration has been notified in writing of the change.
Signature of an officer or director Signature of an officer or director Printed or typed name and fitte)
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 accument 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.
MAY 7 7015
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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