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SECRUTARY OF STATE
TALLATISSEES, TOORIDA

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ÁPR 22 2014' T. CARTER

COVER LETTER

TO:

Amendment Section Division of Corporations

 $_{
m SURIFCT}$. WAFAM INC.

Name of Corporation

DOCUMENT NUMBER:

211000057489

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:

HEIKE BUSBY

Name of Contact Person

ALLURE ACCOUNTING INC.

Firm/Company

3665 BONITA BEACH ROAD, STE. 1-3

Address

BONITA SPRINGS, FL 34134

City/State and Zip Code

HBUSBY@ALLURETAX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARENA LOEFFLER

, 239

992-3355

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, ange is submitted for a corporation organized under the laws of the State of FLORID. For to change its registered office or registered agent, or both, in the State of Florida.		•
	the corporation: WAFAM, INC.		
2. The principal	office address: 1162 KITTIWAKE CIRCLE, SANIBEL, FL 33957		
3. The mailing a	address (if different): 200 SE 2ND ST. 2950, MIAMI, FL 33131		
4. Date of incor	poration/qualification: 06/21/2011 Document number: P110000574	489	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	ROLFF LAW P.A.	14 APR	SE
	100 SE 2ND ST. 2950		
	MIAMI, FL 33131	<u>ب.</u> ان	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	PH 4: 05	THE OFFI
	ALLURE ACCOUNTING INC.	ហ៊	ال حور
	3665 BONITA BEACH ROAD, STE. 1-3		
	P.O. Box NOT acceptable BONITA SPRINGS, FL 34134		
The street addr	ess of its registered office and the street address of the business office of its register by identical.	ered ager	ıt,
Such change wauthorized by the	as authorized by resolution duly adopted by its board of directors or by an officer shaped, or the corporation has been notified in writing of the change.	30	
Skypeti	JOHANN H. WASER, DIRECT Printed or typed name and title	TOR	
I further agree performance of agent. Or, if th hereby confinn	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as regists document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change. Date	istered ss. I	
If signing on bo	chalf of an entity:		
MARENA L			
1	'yped 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 * * *