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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE

APPROVED AND FILED

C. LEWIS

DEC 6 2013

EXAMINER

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|--|--|--|--|
| SUBJECT: Rhy Thuic Art Ine. Name of Corporation | | | |
| DOCUMENT NUMBER: P110000 58666 | | | |
| 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: | | | |
| ELENA NIKOLASHKINA Name of Contact Person RHYTHMIC ART FAC. Firm/Company 301 N Bryan Rd. Address Dania FL 33004 City/State and Zip Code | | | |
| elena e chythuic - art. com E-mail address: (to be used for future annual report notification) | | | |
| For further information concerning this matter, please call: | | | |
| ELENA NIKOCASHKINA at 305 335 5466 Name of Contact Person 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 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: RhyThuic Art The, 2. The principal office address: I ger Wikolashkin | | |
| 2. The principal office address: I gop Wikolashkin | | |
| 301 N Bryon Rd. Davig P1 33004 | | |
| 3. The mailing address (if different): | | |
| 4. Date of incorporation/qualification: 06/24/2011 Document number: P1/000 05 8666 | | |
| 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) | | |
| Igar Nikolashkin | | |
| 301 N Bryan Rd | | |
| Davig FL 33004 Eg 3 | | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): **EUE NA NIKOLASHKINA** **TOP TOP TO SEE THE CORRESPONDED TO | | |
| | | |
| P.O. Boy NOT acceptable | | |
| Dania Pl 33004 | | |
| 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. | | |
| COY ELENA NIKOLASHEKINA | | |
| 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. | | |
| 1/26/2013 | | |
| Signature of Registered Agent Date | | |
| If signing on behalf of an entity: | | |

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

Typed or Printed Name