P11000082074

(Re	questor's Name)	<u> </u>
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations
SUBJECT: Guadel Group, INC. Name of Corporation
DOCUMENT NUMBER: P11000082074
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:
Noel Lacayo Name of Contact Person Guadel Group, INC. Firm/Company 12515 Orange DR STE 808 Address
12515 Orange DR STE 808
Davie FL 33330 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melissa Lacay D at (954) 559, 4688 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 change its registered office or registered agent, or both, in the State of Florida.
	1. The name of the corporation: QUODEL GROUP, Frc.
	2. The principal office address: 12515 Orange DR. #808
	3. The mailing address (if different): 5ame
	4. Date of incorporation/qualification: 9.19.11 Document number: P11000082074
	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)
0el	Lacayo - 19035 E. ST Andrews DE.
	Miami, FL 330/5
	12 TARE 12
	6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
	Noel Lacayo 12515 Orange Dr. Suite 808 3
	Davie, FL 33330
	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 NOE L LACA O 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 confirmithat the corporation has been notified in writing of this change.
	Signature of Registered Agent Date
	If signing on behalf of an entity:
	NOEL WEARYO
	Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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