

P11000107969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

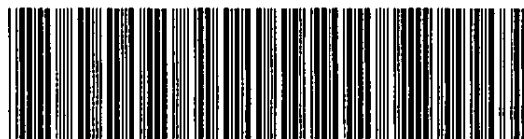
(Business Entity Name)

(Document Number)

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JUL 18 AM 10:56  
TALLAHASSEE, FLORIDA

*RAEM*

JUL 18 2012

C. MUSTAIN

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** iProFix.com, Inc.

Name of Corporation

**DOCUMENT NUMBER:** P11000107969

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:

Jessica Gutierrez

Name of Contact Person

iProFix.com, Inc

Firm/Company

17070 NE Collins, Suite T265

Address

Sunny Isles, FL. 33160

City/State and Zip Code

iprofix.com@gmail.com

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

For further information concerning this matter, please call:

Jessica Gutierrez

Name of Contact Person

at ( 305 ) 733-2825

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: iProFix.com, Inc.
2. The principal office address: 17070 NE Collins, suite T265 Sunny Isles, FL. 33160
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/23/2011 Document number: P11000107969

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)

Jessica Gutierrez 20900 NE 30th Ave, Suite 200

Aventura Florida 33180

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

Jessica Gutierrez 17070 NE Collins, Suite T-265

Sunny Isles Florida 33160

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, or the corporation has been notified in writing of the change.

Jessica Up200  
Signature of an officer or director

Jessica Gutierrez, COO? Chairperson of The Board  
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.*

Jessica Up200  
Signature of Registered Agent

July 16th, 2012

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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