P12000004145

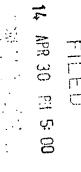
(Re	questor's Name)	
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RAChange 5/13/14

COVER LETTER

TO: Amendment Section Division of Corporations

OPSFORD INTERNATIONAL CORP

Name of Corporation

P12000004145

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:

ARIEL KADYSZ

Name of Contact Person

HOPSFORD INTERNATIONAL CORP

Firm/Company

7286-90 NW 70 ST

Address

MIAMI, FLORIDA 33166

City/State and Zip Code

N/A

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

For further information concerning this matter, please call:

Name of Contact Person

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

	of the corporation: HOPSFORD	registered agent, or both, in the State of	1 10/164
i. The name o	f the corporation: 7286-90 NIM 7	70 ST. MIAMI, FLORIDA 331	
2. The princip	al office address: 7200-00 1417	TO OT . WILMAN, T CONTON 33 T	
3. The mailing	address (if different): SAME		
4. Date of inco	rporation/qualification: 01/11/20	12 Document number: P120	00004145
	nd street address of the current registe artment of State: (If resigned, enter re	ered agent and registered office on file vesigned)	with the
	RESIGNED		
			量 1
	,		- : · · · · · · · · · · ·
6. The name at (if changed)	3	d agent (if changed) and /or registered to	office of the control
	ARIEL KADYSZ		
•	7286-90 NW 70 ST		8
		x NOT acceptable	-
	MIAMI, FLORIDA 33166	 	-
The street add as changed wi	ress of its registered office and the s	street address of the business office of	its registered agent,
	" "	opted by its board of directors or by are notified in writing of the change.	
X	-1111	ARIEL KADYSZ, PRES	
	tured in other or auctive I the appointment as registered age to comply with the provisions of all of my duties, and I am jamifar with this document is being filed merely to his document or provided merely to his document or peration has been notif	nt and agree to act in this capacity, I statutes relative to the proper and co and accept the obligation of my positio o reflect a change in the registered off fied in writing of this change.	
$V \angle$		03/28/2014	
	ignored of Registered Agent	Date	
If signing on	chalf of an entity:		
A			
Aryel	Cadysy		,

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)