## 11200053141

Office Use Only



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10/26/15--01023--002 \*\*35.00

SECRETARY OF STATE

OCT 28 2014 C. CARRUTHERS

## **COVER LETTER**

TO: Amendm Division	nent Section of Corporations	
SUBJECT:	SOLYMAR Name of Corpo	TNC
DOCUMENT N	IUMBER: P12000	053141
The enclosed Sta	atement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all	correspondence concerning this matter to	the following:
	YADIA ES  Name of Contac	STICADA i Person
	Firm/Comp.	any *
	6580 WES	ST 24 COURT #12
	Hialeah, F City/State and Z	FL 33016 ip Code
	E-mail address: (to be used for future	re annual report notification)
For further infor	mation concerning this matter, please call:	
YAD	PA ESTRADA a	t ( ) 443 - 370 2 Area Code & Daytime Telephone Number
Enclosed is a \$3	5.00 check made payable to the Departmen	nt 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 _F/ORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SOLYMAR, inc
1. The name of the corporation: SOLYMAR, INC.  2. The principal office address: 6580 WEST 24 COORT #12
Hialiah, F1 33016
3. The mailing address (if different): Same.
4. Date of incorporation/qualification: 6/11/2012 Document number: P12000 653141
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)
Trustee, as
6580 West 24CT # 12
HIAleah, F1 33016
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
YADIA ESTRADA
6580 West 24 court #12/5AME)
P.O. Box NOT acceptable  Hipleal, Fl 33016.  SAME (ADDRESS)
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 A officer or director  YADIA ESTRADA PRESIDEN + 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.
10/15/2015
Signature of Registered Agent Date
If signing on behalf of an entity:
YADIA ESTRALA  Typed or Printed Name

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