P12-000666676

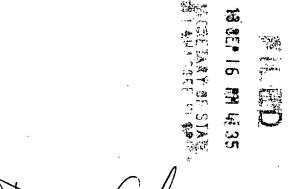
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: Wynmar Corp Name of Corporation
DOCU	MENT NUMBER: P12 000066676
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Diana Marmors Fein Name of Contact Person
	Wynmar Corp Fam/Company
	13010 Snowyjew Rd. Address
	Victorville CA 92392 City State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fun	her information concerning this matter, please call:
Dia	Name of Contact Person at (760) 810 1234 Name of Contact Person Area Code & Daytine Telephone Number
Enclose	d 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: Wynmar Corp
2. The principal office address: 13501 SW 128 St., Ste 207 Miami, FL 33186
3. The mailing address (if different): 13010 Snowliew Rd., Victorville, CA 9239
4. Date of incorporation/qualification: 8/1/12 Document number: P12000 666 76
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)
Carlos A Sanchez
Carlos A Sanchez 14050 SW 84 St, ste. 201
M. Ami FL 33183 6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):
A STATE OF THE STA
FLORIDA ADVANCED PROPERTIES, INC.
13501 SW 128 St. Ste. 207 P.O Box NOT acceptable
Miami FL 33186
The street address of its registered office and the street address of the business office of its registered agent.
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.
Drana Marmorstein Signamie of an efficier or director 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 coimply 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.
Signature of Pagistered Agent 9/12/2013 -
f signing on behalf of an entity:
AidA Fernande 2 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 (93-12)