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COVER LETTER

Division of Corporations		
SUBJECT: New World Inmigration SERVICES, INC. Name of Corporation		
DOCUMENT NUMBER: \$\frac{P\300000\1443}{}		
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:		
ELISABETH V ROUVIA Name of Contact Person		
NEW WORD ImmigRATION SUCS. INC. Firm/Company 1408 SANDRIDGE WAY Modress		
St. Auguti JE, FL 32092 City/State and Zip Code		
St. Augusti JE, FL 32092 City/State and Zip Code Louvi A @ gmail and E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call: **ELISTBETH** SOUVIA** Name of Contact Person** at (904) 343-5442 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

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TO: · Amendment Section

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: New WORLD ImmigRATION SERVICES, INC.
2. The principal office address: #08 SANDRIAGE WAY St. Augus Tine FL 32072 3. The mailing address (if different):
4. Date of incorporation/qualification: 01/04/2013 Document number: P1300000 1443
5. The name and street address of the current registered agent and registered office on file with the
2337 SEMINOLE RO, UNIT A ATLANTIC BEACH, FL 32233E * (ELISABETH BOUNIA)
* (ELISABETH BOUNIA)
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): £ LisABETH BOUVIA
1408 SANDRIDGE WAY P.O. BOX NOT acceptable St. Augustine, FL. 32092
St. Augustink, FL. 32092
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. Line Durin PRESIDENT
Line LO DUNT - ELISABETH V 1800VIA TRES LOEN Signature of an office 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 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.
Signature of Registered Agent Date
If signing on behalf of an entity: LISABETH SOUV. A Typed or Printed Name

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