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| (Requestor's N | ame) | |
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| (Address) | - | |
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| (City/State/Zip/ | Phone #) | |
| PICK-UP WA | IT MAIL | |
| (Business Entit | y Name) | |
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| (Document Number) | | |
| Certified Copies Certif | icates of Status | |
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: MELU Corp.

Name of Corporation

DOCUMENT NUMBER

213000001643

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:

Steven J. Glueck, Esq.

Name of Contact Person

Law Office of Steven J. Glueck, P.A.

Firm/Company

2020 NE 163rd Street Suite 300C

Address

North Miami Beach, FL 33162

City/State and Zip Code

sjglueckpalaw@aol.com

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

For further information concerning this matter, please call:

Steven J. Glueck, Esq.

,,305 948-8880

Name of Contact Person

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

| statement of che | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida unge is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of | Florida | - |
|--|---|------------------------------------|-----------------------|
| 1. The name of | the corporation: MELU Corp. | | |
| 2. The principal | office address: New: 2020 NE 163rd Street Suite 300C ami Beach FL 33162 | | |
| 3. The mailing | address (if different): | | |
| 4. Date of incor | poration/qualification: 01/07/2013 Document number: P130 | 00001643 | |
| 5. The name an | d street address of the current registered agent and registered office on file v rtment of State: (If resigned, enter resigned) | vith the | |
| | Mark Colodne | _ | |
| | 8177 Glades Road Suite 220 | _ =-1 | |
| | Boca Raton FL 33434 | 13 J SECR ALLA | -C-2-77 |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered o | 338 77 | 1_1000 H = 1111 |
| | Steven J. Glueck | AM II: 36 OF STATE S. FLORID | hara: |
| | 2020 NE 163rd Street Suite 300C | : 35 ATA JOINT | V _{ktures} F |
| | P.O. Box NOT acceptable North Miami Beach FL 33162 | - | |
| The street address changed will | ess of its registered office and the street address of the business office of i | ts registered ager | nt, |
| Such change wanthorized by | y authorized by resolution duly adopted by its board of directors or by an le board, or the corporation has been notified in writing of the change. | officer so | |
| Signal . | Sergio A. Rozental, Pre | | |
| I hereby accept I further agree performance of agent. Or, if th hereby confirm | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and commy duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered offit that the corporation has been notified in writing of this change. Date | | |
| If signing on be | half of an entity: | | |
| T | yped or Printed Name | | |

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