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SECRETARY OF STAFLES

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: FMA3 Holdings Inc

Name of Corporation

P1300002610

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:

Patricia Jill Ashley

Name of Contact Person

FMA3 Holdings Inc

Firm/Company

4798 S. FL Ave, PMB 338

Address

Lakeland, FL 33813-2181

City/State and Zip Code

bananalake@gmail.com

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

For further information concerning this matter, please call:

Patricia Jill Ashley

₄₇ 863 \ 446-1650

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 chan	ovisions of sections 607.0502, 6 ge is submitted for a corporation to change its registered office or	organized under th	e laws of the State of FLORID	
1. The name of the	e corporation: FMA3 Holdi	ings Inc.		
2. The principal o	1562 Joland	Cove Rd, Coc	onut Cove Marina,	
	Ft. Pierce, F	L 34949		
3. The mailing ad-	dress (if different): 4798 S. I	Florida Ave, P	MB 338	
	Lakeland	d, FL 33813-21	181	
4. Date of incorpo	oration/qualification: 01/08/2	2013 Docum	ent number: P13000002	610
5. The name and s	street address of the current regist nent of State: (If resigned, enter r	tered agent and regi	stered office on file with the	
_	Ashley Financial Service	es PA CPA		
_	1562 Island Cove Rd., 0	Coconut Cove	Marina	
_	Ft. Pierce, FL 34949			밀
6. The name and s (if changed):	street address of the new registere	ed agent (if changed) and /or registered office	SEGRE OF CORPURS
_	Thomas J. Wohl			PR 23 M
_	425 S. Commerce Ave) .		= 1
_	Sebring, FL 33870	ox NOT acceptable		. 27
The street addres as changed will b	s of its registered office and the e identical.	street address of th	e business office of its registe	red agent,
Such change was authorized by the	authorized by resolution duly ac board, or the corporation has be	dopted by its board een notified in writi	of directors or by an officer sing of the change.	0
Patricia	of an Officer or director		a Jill Ashley, Pres.	·
I hereby accept the I further agree to performance of magent. Or, if this	ne appointment as registered ag comply with the provisions of a ny duties, and I am familiar with document is being filed merely nat the corporation has been not	ll statutes relative i and accept the obl to reflect a change	to the proper and complete igation of my position as regi in the registered office addre.	stered ss, I
		4	120/15	
Signa	ture of Registered Agent		Date	
If signing on beha	alf of an entity:			
Тур	ed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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