P13000011553

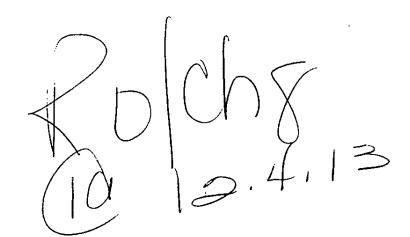
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: VIDA Business Partners, Inc.

P1300011553

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:

Samantha Jackson

Name of Contact Person

Meriam Corporate Services

Firm/Company

PO Box 52588

Address

Mesa AZ 85208

City/State and Zip Code

meriamfinancial@gmail.com

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

For further information concerning this matter, please call:

Samantha Jackson

₃₁/20 \318.8456

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 cha	nge is submitted for a corporation org	0502, 607.1508, or 617.1508, Florida Statutes, the ganized under the laws of the State of Florida istered agent, or both, in the State of Florida.	nis ——
	he corporation: VIDA Business		
2. The principal	office address: 19 West Flagler	St Ste 816 Miami FL 33132	
3. The mailing a	ddress (if different): 19 West Flag	gler St Ste 816 Miami FL 33132	
4. Date of incorp	poration/qualification: 02/04/2013	B Document number: P1300001155	
5. The name and		d agent and registered office on file with the	
	Sasha Wang		
	1444 BISCAYNE BLVD ST	E 210	古器
	MIAMI, FL 33132		5
6. The name and (if changed):	street address of the new registered a	gent (if changed) and /or registered office	13 HOV 26 PH 23 W2
	Sasha Wang		22 %
	19 West Flagler St Ste 816	·	(2)
	P.O. Box 1 Miami FL 33132	NOT acceptable	
The street addre	ess of its registered office and the street be identical.	eet address of the business office of its registere	d agent,
		ted by its board of directors or by an officer so notified in writing of the change.	
Signatur	Number of an officer or director	Sasha Wang, President Printed or typed name and title	
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with an	and agree to act in this capacity. tatutes relative to the proper and complete d accept the obligation of my position as registe eflect a change in the registered office address, d in writing of this change.	ered I
Sesha L	lave	Sasha Wang, President	
_	nature of Registered Agent half of an entity:	Date	
Ту	ped or Printed Name		

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

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