P13000051734

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





800259530948

04/30/14--01016--025 **35.00

SECRETARY OF STATE

SECRETARY OF STATE

APR 30 PM 1:47

C. LEWIS

MAY 1 2 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT, SAMZ WORLD WIDE CORP

Name of Corporation

CUMENT NUMBER: P13000051734

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:

Stanley Zachary

Name of Contact Person

SAMZ WORLDWIDE CORP

Firm/Company

901 NW 141ST AVE #101

Address

Pembroke Pines, FL 33028

City/State and Zip Code

precision@shopdrawings1.com

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

For further information concerning this matter, please call:

Stanley Zachary

,,954

258-1563

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	provisions of sections 607.0502, 617.0502, 607.1508, or 6. ange is submitted for a corporation organized under the law er to change its registered office or registered agent, or both	vs of the State of Florida		
1. The name of t	the corporation: SAMZ WORLDWIDE CORP.			
2. The principal	office address: 901 NW 141ST AVE PEMBRO	KE PINES FL 3302	28	
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: June 14, 2013 Document i	number: PI30000517	'34	
	d street address of the current registered agent and registere runent of State: (If resigned, enter resigned)	d office on file with the		
	Stanley Zachary			
	1258 Sabal Trail		74 SE	
	Weston, FL Us 33327		APR 30 SECRETAR ALLAHASS	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		※55 ※55 ※55 ※55 ※55 ※55 ※55 ※55 ※55 ※55	
	Stanley Zachary		Figure 1:47	
901 NW 141ST AVE #101				
P.O. Box NOT acceptable PEMBROKE PINES, FL 33028				
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.				
President				
	re of an officer or director Printe	d 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.				
Blank Jackey April 28, 2014				
If signing on be	erlature of Registered Agent Chalf of an entity:	Date		
Stanley Zad	chary			
T	yped 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