

P/3000054000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

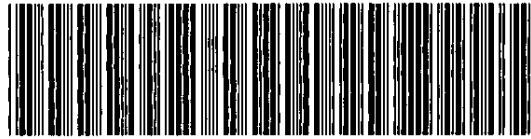
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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Change

05/26/15--01018--015 **35.00

DEPT. OF STATE
TALLAHASSEE, FLORIDA

2015 MAY 26 PM 2:35

FILED

DOR
5/29/15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Solution Center Inc.

Name of Corporation

DOCUMENT NUMBER: P13000054000

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:

Jennifer Howson

Name of Contact Person

Firm/Company

680 NW 100th LN

Address

Coral Springs, FL 33071

City/State and Zip Code

amazintints@gmail.com

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

For further information concerning this matter, please call:

Khouri Howson

Name of Contact Person

at **954 818-1181**

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

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: Solution Center Inc
2. The principal office address: 680 NW 100th LN Coral Springs FL 33071
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/24/2013 Document number: P1300054000
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

resigned

Khour1 Howson

680 NW 100th LN

Coral Springs, FL 33071

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jennifer Howson

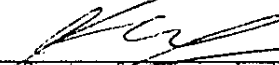
680 NW 100th LN

P.O. Box NOT acceptable

Coral Springs, FL 33071

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.

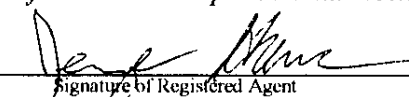


Signature of an officer or director

Khour1 Howson

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

5/18/2015

Date

If signing on behalf of an entity:

Typed 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
CR2E045 (03/12)