P13000082847

(Requestor's Name)
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SEURETARY OF STATE
ALLAHASSEF FLORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 4, 2014

AHMED MOHAMED 1141 SEDGWICK DR WESLEY CHAPEL, FL 33543

SUBJECT: ACTIVE PLAZA INVESTMENTS, INC.

Ref. Number: P13000082847

We have received your document for ACTIVE PLAZA INVESTMENTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please have an officer / director sign the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 614A00025623

COVER LETTER

Division of Corporations
SUBJECT: Active Plaza Investments INC. Name of Corporation
DOCUMENT NUMBER: P130000 82847
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:
Ahmee Mohamed Name of Contact Person
Active plaza Investments TVC Firm/Company
1141 Sedswick drive
Wesley Charel FL 33543 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alimed Molecmed at (\$13) 203 - 0999 Name of Contact Person at (\$13) 203 - 0999 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

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR, BOTH FOR CORPORATIONS

rursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Final State of Final State of Florida.
1. The name of the corporation: Active place Twestments INC
2. The principal office address: 9000 C N Florida Ave
Tampe, FL 33604
3. The mailing address (if different):
4. Date of incorporation/qualification: \\\ \(\lambda \)
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)
Change Address to
1411 Sedquick De
Desley Chapel /FL 33543 Es =
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
1411 Sedgwick Drive
Wesley Charel /FL 33543 P.O. Box NOT acceptable
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 ANNED MOHAMED OWNER 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 Date
If signing on behalf of an entity:
Typed 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 * * *