P13000090303

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(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

KESIDDS HOLDINGS FUC Name of Corporation SUBJECT:

DOCUMENT NUMBER: <u>P300090303</u>

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:

1CHAFE HAROMAN Name of Contact Person REFIDDS HOLDINGS, FNC Firm/Company 55 W 26th St Suite 75 Address Per York NY 10010 City/State and Zip Code

Mhartman & residds.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAGE HAREMAN at (646) 276-4452 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 Tallahassec, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045(03/12)

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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 <u>Feorevolu-</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RESIDDS HOLDIDGS, Fue.	
2. The principal office address: FOI West Cypress Creek Ro., Suite 300	
Fort Lauderdale FL 33309	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/04/2013 Document number: P1300090303	
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)	
TORRES LAW PA	>
3325 5 University Dr Shite 200	
Fort Laudurdale, FL 33328 5	 لر
6. The name and street address of the new registered agent (if changed) and /or registered office	
MICHNEL PREVILLE	
701 WEST CYPRESS CREEK RD. Suite 300 P.O. Box NOT acceptable	
Fort Landerdale, FL 33309	
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.	
Winner R HARD Michung R Hamorian JR	

Signature of an officer or direction

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 duiles, 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.

Mike Preville

BDC0B1CC7 Signature of Kegistered Agent

4/27/2015

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)