## P14000033858

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	<del>= #)</del>
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



700263333057

700263333057 10/01/14--01037--003 \*\*35.00

14 OCT -1 PH 12: 57

11,10,10

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUSTAINSPRINKLE INC

P14000033858

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:

## VARUNA AGARWAL

Name of Contact Person

Firm/Company

4824 NW 124TH WAY

Address

CORAL SPRINGS, FL 33076

City/State and Zip Code

agarwalvaru@gmail.com

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

For further information concerning this matter, please call:

/ARUNA AGARWAL

772 418-7913
Area Code & Daytime Telephone Number

Name of Contact Person

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	17.0502, 607.1508, or 617.1508, Florida Statutes, or organized under the laws of the State of FLORIDA		
		registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: SUSTAINSPI	MDI E BOAD 103		
	office address: 11788 W SAM	WIFEE ROAD 103		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 04/08/14	4	358	
	street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	ANKUR AGARWAL (RE	ESIGNED)		
	4824 NW 124TH WAY			
	CORAL SPRINGS, FL 3	33076		•
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or registered office	14 OCT -1	STATE OF THE
	VARUNA AGARWAL	,		
	4824 NW 124TH WAY		PH 12: 57	- 60 to 10 t
	CORAL SPRINGS, FL 3	Box NOT acceptable	57	HONS HE
The street addre	ss of its registered office and the be identical.	street address of the business office of its registe	red ag	ent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has be	dopted by its board of directors or by an officer seen notified in writing of the change.	ю	
Signatü	Fan officer or director	VARUNA AGARWAL Printed or typed name and title		_
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered ag o comply with the provisions of a my duties, and I am familiar with s document is being filed merely that the corporation has been no	gent and agree to act in this capacity. All statutes relative to the proper and complete In and accept the obligation of my position as regi to reflect a change in the registered office addre. tified in writing of this change.	stered ss, I	
Sign	nature of Registered Agent	09/25/2014 Date		_
	half of an entity:	2-1-		
Т;	ped or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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