P1400059857

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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s. Young

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: EQUITY NEXT INC. Name of Corporation
DOCUMENT NUMBER: \$\frac{14000059857}{}\$
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:
Daniel Piwchasov Name of Contact Person
\cdot
EQUITY NEXT INC.
rimi/Company
22 W 535 Butter Field RU SU
Glen Elly N IL 60137, Otty/State and Zip Code
Daniel Q EQuity Next. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel Pinchasov at 56/900-7000 Name of Contact Person at 56/900-7000 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

CR2E045 (03/12)

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 $Flordg$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: EQUITY NEXT TWC.
2. The principal office address: 22 W 535 Butterfield Rd
Suite, 12H Glen Ellyw IL, 60137
3. The mailing address (if different):
4. Date of incorporation/qualification: 07/15/20/4 Document number: P14000059857
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)
PINCHOSON /)aniel
22 W 535 Butterfield Rd
suite, 5 Glen Ell-yn IL 60/37.
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
T.R. Grossman
Silver Control of Files
2120 SW 92 Ter, Fort Lauderdale FL.
P.O. Box NOT acceptable 33324,
33327
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.
Atomos 10,19,17 Daniel PINCHASOV PRESID
Signature of an officer or director Printed or typed riame and title Printed or typed riame and title Printed or typed riame 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.
Modinar 1 2013
Signature of Registered Agent Date Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FRR: \$35.00 * * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00 * * * \$55.00

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314