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COVER LETTER

Division of Corporations
SUBJECT: Kress Solutions Inc. Name of Corporation
DOCUMENT NUMBER: P 140000 68155
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:
Larry Kress Name of Contact Person
Kress Solutions, Inc.
Largo 71 33774 City/State and Zip Code
LKRESSOBIO @ gwail. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Lary K.455 Name of Contact Person at (270) 300-4356 Area Code & Daytime Telephone Number
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 Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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

statement of change is submitted for a corporation organized under the laws of the State of Florida Statutes, this
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Kress Solutions, Inc
2. The principal office address: 11100 1415 Way, Large, 72 33774
3. The mailing address (if different): Same
4. Date of incorporation/qualification: D8 15/2014 Document number: P140006 68155
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)
LEGALINC CORPORATE SERVICES INC.
2846 NW 79TH AVENUE DORAL, FL 33122 US
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Larry Kress 11(00 1415 Way P.O. Box NOT acceptable
Larry Kress
Larry Kress 11(00 1415 Way P.O. Box NOT acceptable Largo, 7L 33774
P.O. Box NOT acceptable
<u> </u>
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 object or director Printed or typed name and little
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 Sep T 9, 2015 Date
Signatule 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

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