## 614 000081 93P

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
!						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



000292668630

11/30/16--01018--007 \*\*35.00



\n'\n'\

## **COVER LETTER**

TO: A	Amendment Section Division of Corporations		
SUBJEC			
	Name of C	Corporation	
DOCUM	P14000081226 MENT NUMBER:		
The encle	losed Statement of Change of Registered Offic	ce/Agent and fee are submitted for filing.	
Please re	eturn all correspondence concerning this matte	er to the following:	
	Stacey Seldin		
	Name of Co	ontact Person	
	Mariana Tek Corporation		
Firm/Company			
	1400 Eye Street NW, STE 250		
	dress		
	Washington, DC 20005		
	City/State a	and Zip Code	
debrah@marianatek.com			
	E-mail address: (to be used for	future annual report notification)	
For furth	her information concerning this matter, please	call:	
Debrah Herman		813 917-7733 at ( )	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed	d is a \$35.00 check made payable to the Depa	urtment 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

-	provisions of sections 607.0502, 617. inge is submitted for a corporation or			
•	r to change its registered office or reg	ī .		-
1. The name of t	the corporation: Mariana Tek Corpora	tion		
The principal office address: 1400 Eye Street NW,     Washington, DC 20005		STE 250		
				·
3. The mailing a	ddress (if different):		······································	
4. Date of incom	poration/qualification: October 2, 20	14 Document	number: P1400008	31226
	d street address of the current register trnent of State: (If resigned, enter resi		ed office on file wit	
	David Seldin			2018
	1571 Oceanview Drive			真直
	Tierra Verde	FL	33715	N 30 ANASSE
6. The name and (if changed):	d street address of the new registered	agent (if changed) an	d /or registered offi	河口 電
	Debrah Herman			11 6
	15905 Prince William Place			
		NOT acceptable		
	Odessa	FL FL	33556	i
=	ess of its registered office and the str be identical.			4
Such change was authorized by the	as authorized by resolution duly adopte board, or the corporation has been	pted by its board of a notified in writing	directors or by an o of the change.	fficer so
24	aw Sell	Stacey Seldin		CEO/Founder
I hereby accept I further agree performance of	the appointment as registered agen to comply with the provisions of all : my duties, and I am familiar with an is document is being filed merely to that the corporation has been notifi	 tand agree to act in statutes relative to the	he proper and comp tion of my position	 plete as registered
By: Sig	Smallure of Registered Agent	11/28/16 Date		
If signing on be	chalf of an entity:			
Debrah Herma			•	
1	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)