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Certified Copies	Certificates	s of Status
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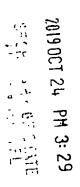
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: IMW Group, Inc.			
Name of Corp. DOCUMENT NUMBER: P14000082214			
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to			
Ian Welch			
Name of Conta	ct Person		
IMW Group, Inc.			
Firm/Company			
16201 SW 95th AVE #100A			
, Addres			
Palmetto Bay, FL 33157			
City/State and	Zip Code		
welchiji@gmail.com			
E-mail address: (to be used for futu	ire annual report notification)		
For further information concerning this matter, please cal	1:		
lan Welch	786 379-0774		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Departm	ent of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1 statement of change is submitted for a corporation organized uncorporation in order to change its registered office or registered age	der the laws of the State of Florida
1. The name of the corporation: IMW Group. Inc. 2. The principal office address: 16201 SW 95th Ave #1	00A Palmetto Bay, FL 33157
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/01/2014	Document number: P14000082214
5. The name and street address of the current registered agent and Florida Department of State: (If resigned, enter resigned)	d registered office on file with the
lan Welch	
16201 SW 95th Ave #204	•
Palmetto Bay, FL 33157	
6. The name and street address of the new registered agent (if changed):	
Ian Welch	(F. /s) Q
16201 SW 95th Ave #100A	
Palmetto Bay, FL 33157	· .
The street address of its registered office and the street address as changed will be identical.	of the business office of its registered agent,
Such change was authorized by resolution duly adopted by its bauthorized by the board, or the corporation has been notified in	board of directors or by an officer so writing of the change.
Stenature of an officer or director	Welch President
I hereby accept the appointment as registered agent and agree I further agree to comply with the provisions of all statutes releperformance of my duties, and I am familiar with and accept the agent. Or, if this document is being filed merely to reflect a chareby confirm that the corporation has been notified in writing	ative to the proper and complete he obligation of my position as registered lange in the registered office address, l
Signature of Registered Agent	13/20/2019 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 CR2E045 (03/12)

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