P14000087008

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COVER LETTER

TO: Amendment Section **Division of Corporations** 1 World Business Consulting Solutions Corp Name of Corporation P14000087008 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: Ms. Belkis Mujica Name of Contact Person 1 World Business Consulting Solutions Corp Firm/Company 511 SE 5 Avenue #1708 Fort Lauderdale FL 33301 City/State and Zip Code mujicab@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Belikis Mujica 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 chang	ge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
 The name of the The principal of 	211 CE 2 CH	ness Consulting Solutions Corp reet #608, Dania Beach FL 33004	
3. The mailing add	dress (if different):		
4. Date of incorpo	ration/qualification:10/22	/14	
	treet address of the current regis nent of State: (If resigned, enter	tered agent and registered office on file with the resigned)	
	Ms. Bell	kis Mujica	
_	311 SE 3 Street #608		
	Dania Bea	ch FL 33004	
6. The name and s (if changed):	treet address of the new registere	ch FL 33004 ed agent (if changed) and /or registered office	
	511 SE 5 A	venue #1708	
_	Fort Lauder	dale FL 33301	
		Box NOT acceptable	
		street address of the business office of its registered agent,	
,	,	dopted by its board of directors or by an officer so een notified in writing of the change.	
/ belking	Mysica oran officer or director	Belkis Mujica Printed or typed name and title	
I haraby accept th	ie appointment as vegistered ag	ent and agree to act in this capacity. Ill statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I tified in writing of this change.	
V Belk	& Mexica	9/21/16	
Signal If signing on beha	ture of Registered Agent	Date	
Тур	ed 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 * * *