## PIUDIDOS

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

SUBJECT: ONLINE CORPORATION OF AMERICA
Name of Corporation

DOCUMENT NUMBER: P14 QQQ 1 QQQ 63

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:

Elleen CRONIN Name of Contact Person

Online Corporation of America

2 Fielding LANE Address

PAIN Coast, FL 32137.

Ethot + Kayne a gmail. com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elliott KAYNE at (570
Name of Contact Person Area Code

at (570) 686 23 00
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

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TO:

Amendment Section Division of Corporations

## 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 FloRidA	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: ON inc CORPORATION OF AMERICA  2. The principal office address: 2 Fielding LANE PAIM Coast, FL 3213	 
2. The principal office address: 2 FIELDING LANE FAIM COAST, FL 32/3	_
3. The mailing address (if different):	_
4. Date of incorporation/qualification: Dec 14, 2014 Document number:	
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)	
INCORP SERVICES, INC.	
17888 67th Court north	ريا جدا ۾
Lox Ahatchee, FL. 33470	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Eleen Crowin  A Fielding LANE  P.O. Box NOT acceptable  PAlm Coast, FL 32137.	
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.	
Elliott Kanersky President Signature of an officer or director (Kayn) Elliott Knevsky President	-
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.	
Eilean Charin May 26, 2015.  Signature of Registered Agent Date	
If signing on behalf of an entity:  Cliotti Kanevsky (Karyne)  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 \* \* \*