P15000003753

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Next Level Globalization, Inc.

Name of Corporation

DOCUMENT NUMBER:

P15000003753

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:

Michael Parrish

Name of Contact Person

Next Level Globalization, Inc.

Firm/Company

601 Heritage Dr. Suite 145

Address

Jupiter, FL 33458

City/State and Zip Code

mparrish@nlgworldwide.com

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

For further information concerning this matter, please call:

Michael Parrish

.561

214-8155

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 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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Next Level Globalization, Inc.
2. The principal	office address: 601 Heritage Dr. Suite 145 Jupiter, FL 33458
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: January 12th, 2015 Document number: P15000003753
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Michael Parrish
	601 Heritage Dr. Suite 103A Jupiter, FL 33458
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office Michael Parrish
	Michael Parrish 601 Heritage Dr. Suite 145 Jupiter, FL 33458 P.O Box NOT acceptable
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
	Michael Parrish Printed or typed name and title
I hereby accept I further agree t performance of	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the Corporation has been notified in writing of this change.
Sign	October 30th, 2017 Date
_	half of an entity:
Michael Pai	
Tŷ	ped 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)