Division of Corporations Electronic Filing Cover Sheet

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(((H15000228086 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BUSINESS FILINGS

Account Number: 105256001620 Phone

: (608)827-5300

Fax Number : (608)827-5501

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE FREE SALES PLATFORM INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

SEP 2 3 2015

C. CARROTHERS

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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.	
The name of the corporation: FREE SALES PLATFORM Inc. The principal office address: 3543 Wiles Rd Apt 105, Coconut Creek, FL 33073	
3. The mailing address (if different): 3543 Wiles Rd Apt 105, Coconut Creek, FL 33073	
4. Date of incorporation/qualification: 4/23/2015	
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)	
BUSINESS FILINGS INCORPORATED	
515 E. PARK AVE	28
TALLAHASSEE, FL 32301	2815 SEP
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	22
(A)	æ.
1200 South Pine Island Road	9: 30
P.O. Box NOT acceptable Plantation, FL 33324	⊃
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.	
Signature of an officer or director Printed or typed name and title	
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.	
MWell 9/22/2015	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Mark Williams, AVP 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) Fax Audit #H15000228086 3	