Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000211058 3)))



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To:

11111

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number: I20120000007

Phone Fax Number

: (702)866-2500 : (702)866-2689

SEP 0 2 2015

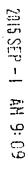
C. CARROTHER:

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

Email .	Address:
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REGISTERED AGENT CHANGE **BIZZYY NETWORK INC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00



11:07:07 a.m. 09-01-2015

2 /3

COVER LETTER

nt Section F Corporations	
Bizzyy Network Name of Corp	Inc pration
MBER: P15000068030	
ment of Change of Registered Office/A	gent and fee are submitted for filing.
orrespondence concerning this matter to	the following:
Jackie DeF	lippis
Name of Contac	it reison
InCorp Service	es, Inc
Firm/Comp	any
2360 Corporate Circ	la · Suite 400
Address	
Henderson NV 8	9074-7739
City/State and 2	ip Code
D	
E-mail address: (to be used for futu	re annual report notification)
	,
ation concerning this matter, please call	·
on behalf of Incorp Services, Inc. ne of Contact Person	at (702) 866-2500 Area Code & Daytime Telephone Number
00 check made payable to the Departme	nt of State.
Mailing Address:	Street Address:
	Street Address: Amendment Section
•	Division of Corporations Clifton Building
	Corporations Bizzyy Network Name of Corpo

Tallahassee, FL 32314

CR2E045 (03/12)

H150002110583

2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of change is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this eration organized under the laws of the State of Florida
	fice or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bizzyy Ne	twork Inc
2. The principal office address: 7950 NW	53rd Street, Suite 337, Miami, FL 33131
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/1	2/2015 Document number: P15000068030
The name and street address of the curren Florida Department of State: (If resigned,	t registered agent and registered office on file with the enter resigned)
CORPORATE SOLUT	TIONS USA INC
1111 Brickell Ave	
Mlami, FL 33131	21.0
6. The name and street address of the new re (if changed):	egistered agent (if changed) and /or registered office
InCorp Services, Inc.	사건 분. 사건함
17888 67th Court Nor	th
Lavebatebae El 2247	P.O. Box NOT acceptable
Loxahatchee, FL 3347	0
The street address of its registered office as as changed will be identical.	nd the street address of the business office of its registered agent,
Such change was authorized by resolution authorized by the board, or the exponetion	duly adopted by its board of directors or by an officer so has been notified in writing of the change.
1 Sold	Patrick Schmitt, President
Signature of an officer or director	Printed or typed name and title
nerformance of my duties, and I am familia	red agent and agree to act in this capacity. ns of all statutes relative to the proper and complete ar with and accept the obligation of my position as registered aerely to reflect a change in the registered office address, I wen notified in writing of this change.
trob in but lipour	August 28, 2015
Signature of Respitered Agent	Date
Isigning on behalf of an entity:	
Jackie DeFilippis on behalf of Inc	corp Services, Inc.

* * * 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)