P150000 78107

(Re	equestor's Name)			
(Ad	ldress)			
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Addry Solution Inc

Name of Corporation

P15000078107

DOCUMENT NUMBER:

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:

Yelisbell Machado

Name of Contact Person

Addry Solution Inc

Firm/Company

8990 Lake Drive Apto 240

Address

Doral, FL 33166

City/State and Zip Code

addrysolution@gmail.com

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

For further information concerning this matter, please call:

Yelisbell Machado

786 \72

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	nge is submitted for a corporation o	1.0502, 607.1508, or 617.1508, Florida Status rganized under the laws of the State of Florida	da
<u>-</u>	5 5 %	egistered agent, or both, in the State of Floria	ta.
1. The name of t	the corporation: Addry Solution	n Inc	
2. The principal	office address: 8290 Lake Dri	ve Apt 240, Doral, FL 33166	
3. The mailing a	address (if different): n/a		
4. Date of incorp	poration/qualification: 09/21/20	Document number: P1500007	78107
	I street address of the current register treatment of State: (If resigned, enter re-	red agent and registered office on file with th signed)	e
	Resigned		
			2015 NOV 17
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or registered office	MIO: 2
	8290 LAKE DRIVE APT	***************************************	E CO
	P.O. Box	NOT acceptable	
	The name of the President I want show in sunbiz only like	ALARCON, ALEXANDER (DELETE SR)	
		treet address of the business office of its reg	
Such change was authorized by the	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an offic in notified in writing of the change.	er so
(lest.	Yelisbell Machado, S	
I hereby accept I further agree performance of agent. Or. if th	' my duitee and I am familiar with a	statules relative to the proper and complete and accept the obligation of my position as its preflect a change in the registered office ad	registerea
	lest.	10/12/2015	<u></u>
	resture of Registered Agent	Date	
If signing on be	ehalf of an entity:		
Alexander			
7	Typed or Printed Name		

* * * FILING FEE: \$35.00 * * *