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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 4/13/2020		**WALK IN**
ENTITY NAME EPER W	INGS INC.	
DOCUMENT NUMBER		
	PLEASE FILE THE ATTACHED AND RETURN	
XXXX	Plain Copy Certified Copy Certificate of Status	
P	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINATION NUMBER OF CERTIFICATION		- -
TOTAL OWED \$35.00	ACCOUNT # 120140000108 United Corporate Services, Inc.	espail
Please call Tina at the	e above number for any issues or concerns. Thank you so n	ruch!

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

statement of cha	inge is submitted for a corpora	ition organized	07.1508, or 617.1508, Florida S Lunder the laws of the State of <u>F</u> Lagent, or both, in the State of F	Florida	this	
	the corporation: EPER WINGS	_	-			
2. The principal NEW YORK, N	office address: 66 WHITE STE	REET - UNIT 5	01			
3. The mailing a	iddress (if different):			-		
4. Date of incorp	Document number: P16000008552					
	I street address of the current rathert of State: (If resigned, er		t and registered office on file wi	th the		
	NRAI SERVICES, INC.					
	1200 SOUTH PINE ISLAND	ROAD		SEC	2820 /	
	PLANTATION, FL 33324			RETAR	EU APR 13	
6. The name and (if changed):	I street address of the new regi	istered agent (i	f changed) and /or registered off	13.60.17.00.17.00.17.17.00.17.17.17.17.17.17.17.17.17.17.17.17.17.	A	
	United Corporate Services, Inc	ì. 		ME ORIO	7: 44	
	9200 South Dadeland Blvd S	uite 508		***	+	
	Miami, Florida 33156	P.O. Box NO	T acceptable			
		·		-		
The street address changed will	ess of its registered office and be identical.	l the street add	lress of the business office of it.	s registe	red agent	
Such change was authorized by the	as authorized by resolution du ne board, or the corporation h	ily adopted by as been notifi	its board of directors or by an ed in writing of the change.	officer s	so	
m	Pario Gazzola	N	Mario Gazzola			
Signatu	re of an officer of diffector		Printed or typed name and tit	1le		
I hereby accept I further agree of my duties, an document is bet corporation has	the appointment as registere to comply with the provisions ad I am familiar with and acc ing filed merely to reflect a ch s been notified in writing of th	d agent and a of all statutes ept the obligat iange in the re his change.	gree to act in this capacity. Frelative to the proper and comicion of my position as registered gistered office address, I hereb	nplete pe d agent. by confir	erformanc Or, if thi m that the	
(Dim Nash	4	/10/2020			
Sig	Jim Nash Suture of Registered Agent		Date			
If signing on be	half of an entity:					
Jim Nash						
Т	yped or Printed Name		:			

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