P1600044058

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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SEP 0.1 2017 T. 1 FT/HEUD



COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: NINJJA GLOBAL, INC. Name of Corporation				
DOCUMENT NUMBER: P16000044058				
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:				
Samantha Jackson				
Name of Contact Person				
Meriam Corporate Services, Inc.				
Firm/Company				
PO Box 52588				
Address				
Mesa AZ 85208				
City/State and Zip Code				
meriamfinancial@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Samantha Jackson at (720) 318.8456 Name of Contact Person Area Code & Daytime Telephone Number				
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 Street Address: Amendment Section				
Amendment Section Amendment Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/L2)

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

statement of cha	provisions of sections 607.0502, 617.050. nge is submitted for a corporation organ r to change its registered office or registe	ized under the laws of the State	of Florida	
1. The name of t	he corporation: Ninjja Global, Inc.			
2. The principal	office address: 141 NE 3RD AVE	STE 900 MIAMI FL 33	132	
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 05/17/2016	Document number: P16	6000044058	
5. The name and	street address of the current registered a tment of State: (If resigned, enter resigne	gent and registered office on til		
	SIMONE SUETSUGU			
25 SE 2ND AVE STE 810				
	MIAMI, FL 33131			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	SIMONE SUETSUGU			
	141 NE 3RD AVE STE 900		TILE!	
	P.O. Box NOT MIAMI FL 33132	acceptable	The Day	
	ess of its registered office and the street be identical.			
authorized by the	is authorized by resolution duly adopted the board, or the corporation has been not			
ignatu	re of an officer or director	SIMONE SUETSUGU	tresident	
I further agree	the appointment as registered agent and o comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to reflect that the corporation has been notified in	ites relative to the proper and coent the obligation of my novi	non as revisierea	
7		08/21/2017		
	nature of Registered Agent	Date		
It signing on be	half of an entity:			
T,	yped or Printed Name			

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