## P16000051877

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
		MAIL
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT:\_\_\_\_\_\_FLEXIPOS CORPORATION

Name of Corporation

## DOCUMENT NUMBER: P16000051877

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:

MARISOL DIAZ-SANCHEZ

Name of Contact Person

Firm/Company

Address

12314 SW 132nd Court . Miami FL 33186

City/State and Zip Code

mdiazsanchez@newtech.net

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

For further information concerning this matter, please call:

MARISOL DIAZ-SANCHEZ at (305)662 1687 Ext 302 Name of Contact Person at (Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

## 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.

2. The principal office address: 12314 SW 132nd Court, Miami FL 33186

3. The mailing a	ddress (if different):	12314 SW 132nd (	Court , Miami FL 33186	
4. Date of incorporation/qualification: 06/14/2016				
	l street address of the c tment of State: (If resi		gent and registered office on d)	file with the
	MARISOL DIAZ-SA	NCHEZ		
1430 S DIXIE HWY		SUITE 307		202
	CORAL GABLES, F	L 33146		2024 CCT 30
6. The name and (if changed):	street address of the r	new registered agen	t (if changed) and /or registe	ered office 0
	MARISOL DIAZ-SAI	NCHEZ		
	12314 SW 132nd Co	ourt		25
		P O. Box	NOT acceptable	
	MIAMI, FLORIDA 33	3186		

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.

MARISOL DIAZ-SANCHEZ, VP

Signature of an officer or director

RISUE DIAZ-SANCHEZ, VF

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. Thereby confirm that the corporation has been notified in writing of this change.

10/28/2024

Date

If signing on behalf of an entity:

MARISOL DIAZ-SANCHEZ

Typed or Printed Name

Signature of Registered Agent

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE