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(((11200001399773)))

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TO:

Division of Corporations

Fax Number : (830) 617 6380

arom:

Account Name : INCORE SERVICES INC

Account Number : 120120090007 : (702)866 2300 Phone : (702) 266 2689 Fax Number

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

managedreports@incorp.com Email Address:

REGISTERED AGENT CHANGE HMD AMERICA, INC.

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MAY 1 3 2020

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Date: 5/12/2020 7:40:38 AM

COVER LETTER

TO:

Amendment Section Division of Corporations

H20000139977 3

SUBJECT:

HMD AMERICA, INC.

Name of Corporation

DOCUMENT NUMBER:

P16000057670

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:

Janice Null

Name of Contact Person

InCorp Services, Inc.

Finn/Company

3773 Howard Hughes Parkway Suite 500S

Address

Las Vegas, NV 89169-6014

City/State and Zip Code

managedreports@incorp.com

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

For further information concerning this matter, please call:

Janice Null on behalf of InCorp Services, Inc.

in the limit of the strip the trees, the

Name of Contact Person

at (702) 866-2500 . managedreports@incorp.i

Area Code & Daytime Felephone 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

C R2E645 (64/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS H20000139977 3

Pursuant to the p	provisions of sections 607.0502, 617.050	1,25000 (0001) 12, 607.1508, or 617.1508, Florida S	statutes.	this
	nge is submitted for a corporation organ r to change its registered office or regist			
1. The name of t	he corporation: HMD AMERICA, I	NC.		
2. The principal	1200 Brickall Ava. S	te. 510, Miami, FL 33131		
	ddress (if different):			
4. Date of incorp	corporation/qualification: 07/07/2016 Document number: P16000057670			· · · · · · · · · · · · · · · · · · ·
	street address of the current registered at timent of State: (If resigned, enter resign		th the	
	Hoyos, Cristina		_	20
	1200 Brickell Ave., Ste. 510		-: : -	2020 HAY 12
	Miami, FL 33131		_	12
 The name and street address of the new registered agent (if changed) and for registered off (if changed); 		fice	AH 7:	
	InCorp Services, Inc.		 -	ა <u>ა</u>
	17888 67th Court North		_	
	Loxahatchee, FL 33470	ox NOT acceptable		
	ess of its registered office and the stree be identical.			
Such change wa authorized by the	as authorized by resolution duly adopte he board, or the corporation has been n	d by its board of directors or by an otified in writing of the change.	. officer	so
	Signature of an office of director Signature of an office of director Printed or typed name and to			
I hereby accept I further agree of my duties, ar document is he	the appointment as registered agent a to comply with the provisions of all sta ad I am familiar with and accept the ob ing filed merely to reflect a change in t s been natified in writing of this change	nd agree to act in this capacity, tutes relative to the proper and cot ligation of my position as registere he registered office address, I here	ונ <i>פונפ</i> ארנע	verformanc (Or, if thi irm that the
Tar	rice Jull	March 10, 2020		
	nature of Registered Agent	Date		
If signing on be	ehalf of an entity:			
Janice Null on	behalf of InCorp Services, Inc.			
'1	Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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