

P1100000069880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SEC. OF STATE
TALLAHASSEE, FL 32399

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DEC 22 2016
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **SOBE DEFENSE CORP**

Name of Corporation

DOCUMENT NUMBER: **P16000069880**

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:

MELANIE S CORDOBA

Name of Contact Person

SOBE DEFENSE CORP

Firm/Company

11700 NW 101ST RD

Address

MEDLEY/FL/33012

City/State and Zip Code

sobedefense@gmail.com

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

For further information concerning this matter, please call:

MELANIE S CORDOBA

Name of Contact Person

at (**305**) **7960365**

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

16 DEC 20 PM 12:51
TALLAHASSEE, FL
DIVISION OF CORPORATIONS
AMENDMENT SECTION

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.

1. The name of the corporation: Sober Defense Corp
 2. The principal office address: 11700 NW 101ST RD MEDLEY FL 33178

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/23/2016 Document number: P16000069880

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ALI UNLU (REGISNED)
92 SW 3RD ST MIAMI FL 33130

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

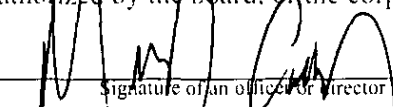
MELANIE S CORDOBA
11700 NW 101ST RD MEDLEY FL 33178

P.O. Box NOT acceptable

16 DEC 20 PM 12:51
 TALLAHASSEE, FLORIDA

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.

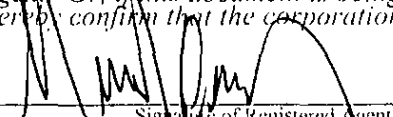


 Signature of an officer or director

MELANIE S CORDOBA (MANAGER)

 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, I hereby confirm that the corporation has been notified in writing of this change.



 Signature of Registered Agent

12/1/2016

 Date

If signing on behalf of an entity:
MELANIE S CORDOBA

 Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
 CR2E045 (03/12)