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COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT:_studio elements five inc

Name of Corporation

P16000091951

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:

IULIIA KONONOVA

Name of Contact Person

STUDIO ELEMENTS FIVE INC

Firm/Company

18201 COLLINS AVE 4407

Address

SUNNY ISLES ,FL 33160

City/State and Zip Code

SERGEY@THE-COLLECTION.US

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

For further information concerning this matter, please call:

SERGEI ZELENY

,614- 5714518

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
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

· • •	BOTH FO	R CORPORATIONS	
statement of ch	ange is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Flori on organized under the laws of the State or registered agent, or both, in the State	of florida
1. The name of	the corporation: studio eleme	ents five inc	
2. The principa	al office address: 18201 collins	s ave 4407	
3. The mailing	address (if different): same		
4. Date of inco	rporation/qualification: 11/16/2	2016 Document number: p16	6000091951
	nd street address of the current reginartment of State: (If resigned, enter	istered agent and registered office on fil r resigned)	le with the
	Juliia kononova		<u></u>
	18201 collins ave 4407	7 ·	
	sunny isles ,fl 33160		16 DEC
6. The name ar (if changed):	-	ered agent (if changed) and /or registere	d office
	luliia kononova		<u> </u>
	18201 collins ave 4407	7	# 03
	P.O.	Box NOT acceptable	
	sunny isles ,fl 33160		<u></u>
The street add as changed wi		e street address of the business office	of its registered agent,
Such change vauthorized by	vas authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by been notified in writing of the change.	an officer so
How	12	Iullia Kononova	
/ /	iture of an officer or director	Printed or typed name a	
I furthér agrée performance a	e to comply with the provisions of of my duties, and I am familiar wi	igent and agree to act in this capacity, all statutes relative to the proper and the and accept the obligation of my posty to reflect a change in the registered of this change.	complete ition as registered
ham	_ _	11/30/2016	
V E	ignature of Registered Agent	Date	
If signing on b	pehalf of an entity:		
lufu	A KONONOVA		

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

Typed or Printed Name