

P170000100390-

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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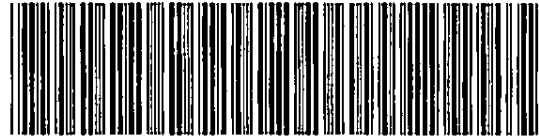
(Business Entity Name)

(Document Number)

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FEB 20 2018  
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: The Salt Nest, Inc.  
Name of Corporation

DOCUMENT NUMBER: P17000100390

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:

Rodrigo Navarrete

Name of Contact Person

The Salt Nest, Inc.

Firm/Company

1875 NW 107 Terrace

Address

Plantation, FL 33322

City/State and Zip Code

rodrigo@thesaltnest.com

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

For further information concerning this matter, please call:

Rodrigo Navarrete

Name of Contact Person

at ( 786 ) 202-7219

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

RECEIVED  
18 FEB 20 PM 12:39  
CR2E045703/12)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 24, 2018

RODRIGUEZ NAVARRETE  
850 N STATE ROAD 7  
PLANTATION, FL 33317 US

SUBJECT: EXPRESS FUNDING GROUP INC.  
Ref. Number: P16000062702

We have received your document for EXPRESS FUNDING GROUP INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted 2 form for the same corporation listing a different new agent's name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 518A00001578

**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.*

1. The name of the corporation: The Salt Nest, Inc.
2. The principal office address: 1875 NW 107 Terrace, Plantation, FL 33322
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/22/2017 Document number: P17000100390

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)

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
TAMPA, FL 33612

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

Rodrigo Navarrete  
1875 NW 107 Terrace  
Plantation, FL 33322

P.O. Box NOT acceptable

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

Rodrigo Navarrete  
\_\_\_\_\_  
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

02/13/18  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)