P190000065040

(Re	questor's Name)			
(ite	.4200.010110)			
	dress)			
(//u	uiess)			
	ld\			
(Ad	ldress)			
	10: 17: 101			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
	-			





400356210084

12/10/20--01912--006 **35.00

S TALLENT

JAN 25 221

7070 DEC 10 AH 8: 29

Ela Ma

COVER LETTER

Amendment Section Division of Corporations

TO:

COLUENZA COND	
SUBJECT: SOLVENTA CORP Name of Corporation	
DOCUMENT NUMBER: P19000065040	
The enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Hernan Arcioni c/o Juan Pimentel	
Name of Contact Person	
Solventa Corp	
Firm/Company	
340 W Flagler St #306	
Address	
Miami, Florida 33130	
City/State and Zip Code	
hernan@solventa.com	
E-mail address: (to be used for future annua	d report notification)
For further information concerning this matter, p	please call:
Juan Pimentel	at (786)340-1421 Area Code & Daytime Telephone Number
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	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	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

statement of che	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, n organized under the laws of the State of <mark>Florida</mark>	this
		registered agent, or both, in the State of Florida.	
	the corporation: SOLVENTA COR		
2. The principal	office address: 19790 W Dixie Hw	y, Office 412, Miami, Florida, 33180	
3. The mailing a	address (if different): 19790 W Dix	ie Hwy, Office 412, Miami, Florida, 33180	
4. Date of incorporation/qualification: 08/13/2019 Document number: P19000065			
	I street address of the current regis timent of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Hernan Pablo Arcioni		
	19790 W DIXIE HWY SUITE 412		
	MIAMI, FL 33180		DEC
6. The name and street address of the new registered agent (if changed) and /or registered offi (if changed):			ZOZODEC 10 AH
	Jose Arcieri Bolano		ά
	601 NE 39th St Apt 304		29
	Miami, Florida 33137	P.O. Box NOT acceptable	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registe	red agent,
Such change wanthorized by the	as authorized by resolution duly a be beard, or the corporation has b	idopted by its board of directors or by an officer seen notified in writing of the change.	0
		HERNAN ARCIONI, PRESIDENT	
	re of all officer or director	Printed or typed name and title	
I nerebyaceept I further agree of my duties, ar document is bei corporation has	the appointment as registered ag of comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang s beengastived powriting of this c	tent and agree to act in this capacity, all statutes relative to the proper and complete pe the obligation of my position as registered agent, we in the registered office address, I hereby confir hange.	rformance Or, if this m that the
		11/19/2020	
- 37	More of Registered Agent	Date	
If signing on be	half of an entity:		
N/A			
T	yped or Printed Name	•	

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