(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
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2 -1 DEC 1 S 2010

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Evolution Two, Inc.				
Name of Corporation P19000078012				
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:				
Chantel Fernandez				
Name of Contact Person				
N/A				
Firm/Company				
2498 W 3 Court				
Address				
Hialeah, FL 33010				
City/State and Zip Code				
Officemanager@zroofing.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Chantel Fernandez 305 623-7663				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Street Address:				
Amendment Section Amendment Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

. .STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	ge is submitted for a corporation organi	, 607.1508, or 617.1508, Florida Statutes, this sed under the laws of the State of Florida red agent, or both, in the State of Florida.	_	
1. The name of the	corporation: Evolution Two Inc	2		
2. The principal of	ffice address: 4411 NW 61 Stree	et, Ft. Lauderdale, FL 33319		
			··	
3. The mailing add	dress (if different):			
4. Date of incorpor	ration/qualification: 10/04/2019			
	treet address of the current registered agnent of State: (If resigned, enter resigned	ent and registered office on file with the		
<u> </u>	Nicasio, Emanuel			
4	411 NW 61 Street			
F	t. Lauderdale, FL 33319			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
<u>J</u>	lose G Rivera Correa	· · · ·	- <u>-</u> -	
4	1411 NW 61 Street	icceptable		
F	P.O. Box NOT: Ft. Lauderdale, FL 33319	icceptable S	****	
-	· · · · · · · · · · · · · · · · · · ·	·		
		ddress of the business office of its registered ag	ient,	
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been not	by its board of directors or by an officer so field in writing of the change.		
Signature	Of an officer or director	Emanuel Nicasio P		
I hereby accept th I further agree to performance of m agent. Or, if this hereby confirm th	ne appointment as registered agent and comply with the provisions of all statu by duties, and I am familiar with and ac document is being filed merely to refle tat the corporation has been notified in	ayree to act in this capacity, tes relative to the proper and complete cept the obligation of my position as registered at a change in the regisiered office address, I writing of this change.	ſ	
Jose G Rive	ture of Registered Agent	11 11 2019		
		Date		
If signing on beha	alf of an entity:			
Турс	ed or Printed Name			

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

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