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-	(Requestor's Name)			
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-	(Address)			
l	(City/State/Zip/Phone #)			
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	(Business Entity Name)			
(Document Number)				
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S. YOUNG

COVER LETTER

TO:

Amendment Section Division of Corporations

WAYYA Ing	
SUBJECT: IOXYA Inc Name of Corporation	
DOCUMENT NUMBER: P20000016663	
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:
CLAUDIA ESPINOSA	
Name of Contact Person	-
IOXYA Inc	
Firm/Company	
310 WAYMONT CT STE 100	
Address	
LAKE MARY FL 32746	
City/State and Zip Code	
CLAUDIA_ESPINOSA81@I	HOTMAIL.COM
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	olease call:
CLAUDIA ESPINOSA	34 (407) 6389200
Name of Contact Person	at (407)6389200 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

	inge is submitted for a corporation organized under the laws of the State of or to change its registered office or registered agent, or both, in the State of			
1. The name of	the corporation: IOXYA Inc		_	
2. The principal	office address: 310 WAYMONT CT STE 100, LAKE MARY, FL 32746			
3. The mailing a	ddress (if different):			
4. Date of incor	poration/qualification: 02/29/2020 Document number: P200000	016663		<u> </u>
	I street address of the current registered agent and registered office on file v tment of State: (If resigned, enter resigned)	vith the		
	CLAUDIA MURIEL			
	310 WAYMONT CT STE 100			
	LAKE MARY FL 32746			
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered o	ffice	2020 JUN 22	7 T
	CLAUDIA ESPINOSA		122	, 20
	310 WAYMONT CT STE 100		A	125
	P.O. Box NOT acceptable LAKE MARY FL 32746	— • , .	6: 47	· Secretaria
	ess of its registered office and the street address of the business office of be identical.		stered a	gent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by a ne board, or the corporation has been notified in writing of the change.	n office	r so	
Clu	CLAUDIA ESPINOSA			
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and code I am familiar with and accept the obligation of my position as registering filed merely to reflect a change in the registered office address. There is been notified in writing of this change.		perforn it. Or i firm the	nance if this it the
Olym	6 06/17/2020			
SI	nature of Registered Agent Date	-		
If signing on bo	half of an entity:			
	yped or Printed Name			

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