# P99000080438

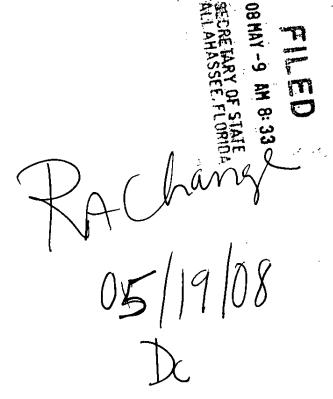
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer:	

Office Use Only



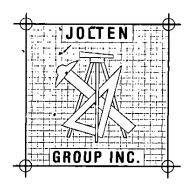
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### **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJE	ECT: JOLTEN GROUP INC. (Name of Co	orporation)		
DOCU	MENT NUMBER: P99000080438			
The en	closed Statement of Change of Registered Office	Agent and fee are submitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
	Orlando Julio Diez (Name of Con	tact Person)		
JOLTEN GROUP INC. (Firm/Company)				
	10185 NORTH WEST 129 (Addr			
HIALEAH GARDENS,FLORIDA, 33018 (City/State and Zip Code)				
For fur	ther information concerning this matter, please ca	all:		
Orlan	do Julio Diez (Name of Contact Person)	at ( 305 ) 364-2870 (Area Code & Daytime Telephone Number)		
Enclose	ed is a \$35.00 check made payable to the Departr	nent 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		



## STATE CERTIFIED GENERAL CONTRACTOR CONSTRUCTION MANAGEMENT

#### **ZONING & CODE ENFORCEMENT CONSULTANT**

License No. QB0020327 & CGCA60687

May 7, 2008

State of Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee, Florida 32314

Ref: Change of address

Please change our address as per the enclosed statement and fee, are submitted for filling: The new address for:

JOLTEN GROUP, INC.
Document number P99000080438
10185 N.W. 129 Terrace
Hialeah Gardens, Florida 33018

Thank you for your consideration in this matter. If you have any questions, please contact us at (786) 295-0112 or (305) 364-2870.

Sincerek

Øflándó J. Dieź President/RA

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S ange is submitted for a corporation organized under the laws of the State of _ er to change its registered office or registered agent, or both, in the State of F	FLA		
	the corporation: JOLTEN GROUP, INC.			
2. The principal	office address: 10185 NORTH WEST 129 TERRACE GARDENS,FLORIDA, 33018			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 09/10/1999 Document number: P99000	0080438		
	d street address of the current registered agent and registered office on file wit rtment of State:	th the		
	Orlando Julio Diez	-		
	6001 NW 153 Street, Suite A	_		
	Miami Lakes, Florida 33014	_		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Orlando Julio Diez /Jolten Group, Inc	ARY ARY		
	10185 NORTH WEST 129 TERRACE (P.O. Box NOT acceptable)	그의 로 [1]		
	HIALEAH GARDENS,FLORIDA, 33018	S 3:		
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 and 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.				
	Orlando Julio Diez, RA ar  (Printed or typed name and t	itle)		
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and comply with the proper and comply amiliar with and accept the obligation of my position as registered ing filed merely to reflect a ghange in the registered office address, I herebes been notified by writing of this change.	aplete performance A agent. Or, if this by confirm that the		
	grature of Registered Agent)  (Date)			
	chalf of an entity:	,		
JOLTEN (	GROUP INC Typed or Printed Name)			

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