

P99000084395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

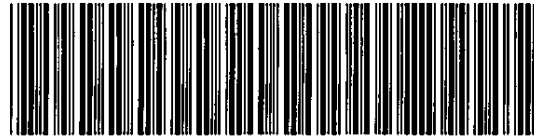
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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P99000084395

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FENIX INTERNATIONAL INC.
(Name of Corporation)

DOCUMENT NUMBER: P99000084395

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:

ADELINA PALACIOS
(Name of Contact Person)

FENIX INTERNATIONAL INC
(Firm/Company)

10800 NW 29th STREET
(Address)

DORAL FL 33172
(City/State and Zip Code)

For further information concerning this matter, please call:

ADELINA PALACIOS at (305) 597-0002
(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
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

P99000084395

**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: FENIX INTERNATIONAL INC.
2. The principal office address: 10800 NW 29th STREET
DORAL FL. 331
3. The mailing address (if different): 10800 NW 29th STREET
DORAL FL. 33172
4. Date of incorporation/qualification: Oct 1, 1999 Document number: P99000084395
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ALFREDO PALACIOS
11531 SW 153 Ave
MIAMI, FL. 33196

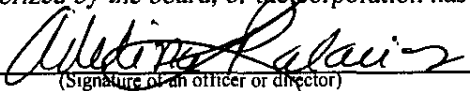
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ADELINA PALACIOS
10800 NW 29th STREET
(P.O. Box NOT acceptable)
DORAL FL. 33172

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TALLAHASSEE, FLORIDA

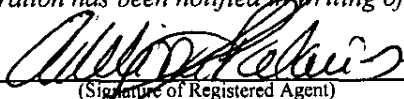
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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)

ADELINA PALACIOS / DIR
(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)

9-1-06
(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 (8/05)

PO300019953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

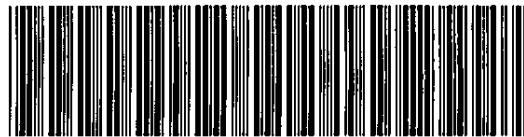
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Serene Quality Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P03000019953

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:

Kimmie Lamm
(Name of Contact Person)

Serene Quality Services, Inc.
(Firm/Company)

PO Box 5233
(Address)

Vero Beach, FL 32961
(City/State and Zip Code)

For further information concerning this matter, please call:

Kimmie Lamm at (772) 978-0210
(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
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: Serene Quality Services, Inc.
2. The principal office address: 936 36th Court SW Vero Beach, FL 32968
3. The mailing address (if different): PO Box 5233 Vero Beach, FL 32961-5233
4. Date of incorporation/qualification: 02/17/2003 Document number: P03000019953
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Toby Lamm

114 North 19 Circle S.W.

Vero Beach, FL 32962

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

Toby Lamm

6710 3rd Place SW

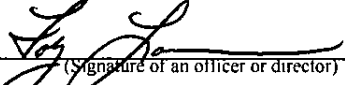
(P.O. Box NOT acceptable)

Vero Beach, FL 32968

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Toby Lamm, President

(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)

10/13/06

(Date)

If signing on behalf of an entity:

Serene Quality Services, Inc.

(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