

N1700000 8420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

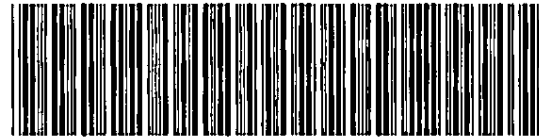
(Business Entity Name)

(Document Number)

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STATE OF ARIZONA  
SECRETARY OF STATE

C. GOLDEN

MAR 30 2019

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** City to City Miami Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N17000008420

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:

Paul R. Alfieri  
Name of Contact Person

Paul R. Alfieri, P.L.  
Firm/Company

2401 W. Cypress Creek Road  
Address

Fort Lauderdale, FL 33309  
City/State and Zip Code

paul@alfierilaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul R. Alfieri at ( 954 ) 315-4315  
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: City to City Miami Inc.

2. The principal office address: 6605 SW 88TH STREET  
MIAMI, FL 33156

3. The mailing address (if different): Same

4. Date of incorporation/qualification: 08/14/2017 Document number: N17000008420

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Paul R. Alfieri, P.L.

5143 NW 42nd Terrace

Coconut Creek, FL 33073

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

Paul R. Alfieri, P.L.

2401 W. Cypress Creek Road


P.O. Box NOT acceptable

Fort Lauderdale, FL 33309

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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.

DocuSigned by:  
  
C92152245881  
Signature of an officer or director

Felipe Assis, 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.*

DocuSigned by:  
Paul R. Alfieri  
3C8921E8589845E  
Signature of Registered Agent

February 28, 2019 | 11:00:59 AM EST  
Date

If signing on behalf of an entity:

Paul R. Alfieri  
Typed or Printed Name

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