P0000084849

(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:
,
Office Use Only



000301490090

07/21/17--01025--016 **35.00



C. GOLDEN

JUL 2 5 2017

COVER LETTER

TO: Amendment Section Division of Corporations

Excellence Title Agency, Inc.

Name of Corporation

DOCUMENT NUMBER: P06000084849

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:

Ulysses Felder, Esq.

Name of Contact Person

Law Offices of Felder & Associates, P.A.

Firm/Company

555 Hollywood Blvd., Suite 303

Hollywood, FL 33021

City/State and Zip Code

ulysses@ufelderlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Alfaro

Name of Contact Person

305 455-4780
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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Excellence Title Agency, Inc.
	office address: 2475 NW 95 Avenue, Suite 5, Doral, FL 33172
3. The mailing a	ddress (if different):
4. Date of incor	poration/qualification: 06/21/206 Document number: P0600084849
5. The name and	I street address of the current registered agent and registered office on file with the thentheft state: (If resigned, enter resigned)
	Maria Alfaro
	2475 NW 95 Avenue, Suite 5
	Doral, FL 33172
6. The name and (if changed):	Doral, FL 33172 I street address of the new registered agent (if changed) and /or registered office
	Ulysses Felder, Esquire
	5555 Hollywood Blvd., Suite 303
	Hollywood, FL 33021
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatu	Maria Alfaro, President Printed or typed name and title
I hereby accept I further agree i performance of	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 complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change.
- Marie Sig	nature of Registered Agent Date
	half of an entity:
waylu_	sped or Printed Name

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