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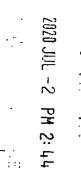
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COVER LETTER

TO:	Amendment Section Division of Corporations	•	
SUBJ Name	ECT: Coradin Law P.A. of Corporation		
DOC	UMENT NUMBER: P06000095844		
The e	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please	e return all correspondence concerning this	matter to the following:	
Ahpal	y Coradin, Esq.		
Name	of Contact Person		
Corad	in Law P.A.		
Firm/	Company		
1395 F	Brickell Avenue, Suite 800		
Addre	258		
Miami	i, FL 33131		
City/S	State and Zip Code		
	ahpaly@coradinlaw.com		
E-ma	il address: (to be used for future annual	report notification)	
For fu	urther information concerning this matter, p	please call:	
Ahpal	y Coradin	at (305) 200-8816 Area Code & Daytime Telephone Number	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclo	sed is a \$35.00 check made payable to the	Department of State.	
	Mailing Address: Amendment Section	Street Address:	
	Amendment Section Division of Corporations	Amendment Section Division of Corporations	
	P.O. Box 6327	The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

CR2E045 (04/13)

\cdot° STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-		n organized under the laws of the State of Florida r registered agent, or both, in the State of Florida.		
1. The name of	the corporation: Coradin Law P.A.			
2. The principal	office address: 1395 Brickell Aven	nue, Suite 800, Miami FL 33131		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 07/20/2006	Document number: P06000095844		
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	Ahpaly Coradin			
	200 S. Biscayne Blvd, Suite 2790			
	Miami, FL 33131			
6. The name and (if changed):	_	red agent (if changed) and /or registered office	2020 JUL	
	1395 Brickell Avenue, Suite 800		-2	
	Miami, FL 33131		PH	
		P.O. Box NOT acceptable	7.7	
The street address changed will	ess of its registered office and the	e street address of the business office of its registered a	gent,	
		adopted by its board of directors or by an officer so been notified in writing of the change.		
	- or other	Ahpaly Coradin, President		
	le of an officer or director	Printed or typed name and title		
I further agree of my duties, and document is bei	to comply with the provisions of a nd I am familiar with and accept t	gent and agree to act in this capacity. all statutes relative to the proper and complete perforn the obligation of my position as registered agent. Or, i ge in the registered office address, I hereby confirm the change.	if this	
,	Correct the second	06/29/2020		
Sig	mature of Registered Agent	Date		
If signing on be	chalf of an entity:			
	yped or Printed Name	_		

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