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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: EXCUI Dental PA  Name of Corporation		
DOCUMENT NUMBER: L12000093945		
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:		
Nataly Santos Name of Contact Person		
Firm/Company		
8835 NW 178 2N Address		
Hiallah FL 33018 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person at (786), 493-4898  Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:  Amendment Section  Amendment Section		

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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

statement of change is submitted for a corporation organized under the laws of the State of	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: EXCLU DENTAL IT	
2. The principal office address: 8835 NW 178 UN	
Hialeah FL 33018	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10 1112 Document number: L12000093745	<u>-</u> >
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)	
Miquel A Martinez	
8835 NW 178 LN	
Hialeah FL 33018	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	SECR
Notaly Santus President	EIAR
8835 NW 17.8 W	35.7
Hialeah, Fl 33018	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	ידונ יידונ
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.	٨
Signature by an officer or director  Migwel A Martinez Presider  Printed or typed name and title	t
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 Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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