

PI3000043273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

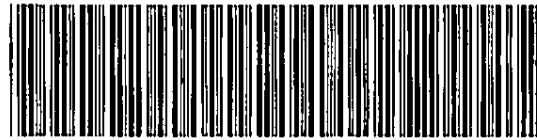
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SECRETARY OF STATE
TALLAHASSEE, FL

10/28/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Karters Holding Corp
Name of Corporation

DOCUMENT NUMBER: P13000043273

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:

Rafael Fabian
Name of Contact Person
Rafael Fabian PA
Firm/Company
3860 SW 8th Street, Suite 200
Address
Coral Gables, FL 33134
City/State and Zip Code
rafael@fabianpa.com

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

For further information concerning this matter, please call:

Rafael Fabian at (305) 856-6700
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 _____ FL _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Karters Holding Corp.

2. The principal office address: 3860 SW 8th Street, Suite 200, Coral Gables, FL 33134

3. The mailing address (if different): 3860 SW 8 Street, Suite 200, Coral Gables, FL 33134

4. Date of incorporation/qualification: 05/15/2013 Document number: P13000043273

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)

Rafael Fabian PA
10631 N Kendall Drive, Suite 145
Miami, FL 33176

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

Rafael Fabian, PA
3860 SW 8th Street, Suite 200
Coral Gables, FL 33134
P.O. Box NOT acceptable

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TALLAHASSEE, FL

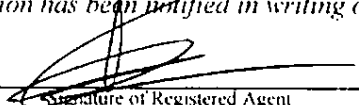
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Silvia M. Barrera
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

8/28/2020
Date

If signing on behalf of an entity:

Rafael Fabian, as President of Rafael Fabian, P.A.
Typed or Printed Name

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