PIUDBIO

(Requestor's Name)							
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(Cit	ty/State/Zip/Phone	e #1					
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PICK-UP	WAIT	MAIL					
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Certified Copies Certificates of Status							
Special Instructions to	Filing Officer:						
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JUL 21 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. AMG FINANACING CORP

Name of Corporation

DOCUMENT NUMBER, P14000096726

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:

Oren Arazi

Name of Contact Person

AMG Financing Corp.

Firm/Company

20225 NE 34th Court, Suite 2219

Address

Miami FL 33180

City/State and Zip Code

oren.arazi@gmail.com

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

For further information concerning this matter, please call:

Oren Arazi

..786

553-1623

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

statement of cha	provisions of sections 607.0502 ange is submitted for a corporal ar to change its registered office	tion organize	d under the laws of th	e State of Florid	ab	
1. The name of 2. The principal Miami FL	the corporation: AMG Finar office address: 20225 NE 3 . 33180	ncing Corp 34th Cour	t, Suite 2219			
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification: 12/02	/2014	Document number	P140000	96726	
	d street address of the current re rtment of State: (If resigned, en		nt and registered offic	e on file with tl	ne	
	1155 Brickell Bay Driv	ve Ste. 25	01			
	Miami FL 33131					
				<u>,</u>	- 	ri ri
6. The name and (if changed):	d street address of the new regis			i		= M 20
	20225 NE 34th Court,	Suite 22	19	de state of the contract of th		
	Miami FL 33180	O Box NOT acc	eptable			60:1
	ess of its registered office and be identical. as authorized by resolution duling the board, or the board, or the board.					gent,
CK	1/5	(Dren Arazi - Pre			
Lhoroby accom	the appointment as registered to comply with the provisions of my duties, and I am familiar visions to document is being filed mer that the corporation has been	l agent and a of all statute vith and acco ely to reflect notified in w	oree to act in this car	d name and title pacity, er and complet ny position as i stered office aa	e registerea ldress, I	l .
			7/14/2015			
Signature of Registered Agent Date		ite				
If signing on bo	chalf of an entity:					
1	Typed or Printed Name					
	***F[]	LING FEE:	\$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)