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(Ŗ	equestor's Name)
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<u> </u>	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
	usiness Entity Name)
(C Certified Copies	ocument Number) Certificates of Status
Special Instructions t	Filing Officer:
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COVER LETTER

TO: Almendment Section Division of Corporations

1

Serifos Inc

P16000019212

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:

Juan Diego Aristizabal
Name of Contact Person

Midtown Realty Group

175 SW 7TH ST, SUITE 2112

Address

MIAMI, FL 33130

City/State and Zip Code

avelez@midtown-realty.com

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

For further information concerning this matter, please call:

Diego Aristizabal Juan

Name of Contact Person

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

CR2E045 (01/12)

DocuSign Envelope ID: 78B38B87-01EF-40AB-B1AC-8CAAE5C9C58D STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1 1	o the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this of change is submitted for a corporation organized under the laws of the State of FLORIDA
	order to change its registered office or registered agent, or both, in the State of Florida.
t. The nam	ne of the corporation: Serifos Inc
2. The prin	cipal office address: 175 SW 7TH ST, SUITE 2112
3. The ma	ling address (if different):
4. Date of	incorporation/qualification: 03/01/2016 Document number: P16000019212
	ne and street address of the current registered agent and registered office on file with the Department of State: (If resigned, enter resigned)
	NRAI SERVICES, INC
	1200 SOUTH PINE ISLAND ROAD
	PLANTATION, FL 33324
6. The nan (if chan	te and street address of the new registered agent (if changed) and /or registered office ged): DADE REGISTERED AGENT INC
1	
	175 SW 7TH ST, SUITE 2112 P.O. Box NOT acceptable
i	MIAMI, FL 33130
The street	address of its registered office and the street address of the business office of its registered agent, will be identical.
Such chan authorized	ge was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.
Survio	Madero SERGIO MADERO, DVP
—5018020 I herehy ai I furthar a	Printed or typed name and title cept the appointment as registered agent and agree to act in this capacity, gree to comply with the provisions of all statutes relative to the proper and complete ce of my duties, and I am familiar with and accept the obligation of my position as registered if this document is being filed merely to reflect a change in the registered office address, I from that the corporation has been notified in writing of this change. Signature of Registered Agent Date
If signing	on behalf of an entity:
DADE	REGISTERED AGENT INC Typed or Printed Name
	* * * FILING 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)