P16000077703

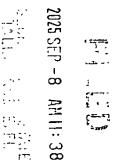
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COVER LETTER

TO:	Amendment Section Division of Corporations	
	ECT: AA Glass & Windows Inc of Corporation	
DOCU	JMENT NUMBER: P16000077703	
The en	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this r	matter to the following:
Matthe	w Maranges	
Name	of Contact Person	
Jones \	Walker, LLP	
Firm/C	Company	
	Biscayne Blvd, #3000	
Addres	SS	
	, FL 33131	
City/S	tate and Zip Code	
	mmaranges@joneswalker.com	
E-mai	l address: (to be used for future annual	report notification)
For fur	rther information concerning this matter, pl	ease call:
Matthe	w Maranges	at (305)679-5714 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the E	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

CR2E045 (04/13)

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

	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org			s, this
in orde	er to change its registered office or reg	istered agent, or both,	in the State of Florida.	
1. The name of	the corporation: AA Glass & Windows	Inc		
2. The principal	office address: 2020 NW 129 Ave, Ste	206, Miami, FL 33182		
3. The mailing:	address (if different): 10244 SW 26 Ten	r, Miami, FL 33165		
4. Date of incorporation/qualification: 09/21/2016 Document number: P16000077703				
5. The name an	d street address of the current registere rtment of State: (If resigned, enter resigned)	d agent and registered		
	411Taxes.com LLC			~ >
	1165 W 49 St, Ste 206		AL CO	1025 SEP
	Hialeah, FL 33012		<u></u>	- F
6. The name an (if changed):	d street address of the new registered a	gent (if changed) and /	or registered office	8 MHI: 3:
	Jones Walker, LLP, c/o Matthew Maran	nges, Esq.	<u>~</u>	 ⇔
	201 S Biscayne Blvd, Ste 3000			œ
	P.O. Miami, FL 33131	Box NOT acceptable		
	ess of its registered office and the stre be identical.			
Such change w authorized by t	as authorized by resolution duly adop he board, or the corporation has been	ted by its board of dir notified in writing of	ectors or by an office the change.	г \$0
*	· //	Abel Hemandez	PRESIDENT	_
I hereby accept I further agree of my duties, as document is be	the of an other or director the appointment as registered agent to comply with the provisions of all s and I am familiar with and accept the c ing filed merely to reflect a change in s been notified in writing of this chan	and agree to act in th tatutes relative to the bligation of my positi the registered office	or typed name and title is capacity. proper and complete p on as registered agen address, I hereby conj	performance t. Or, if this firm that the
((07/09/2025		
	remains of Registered Agent chalf of an entity:		Date	
Matthew Maran	·			
	yped 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 (04/13)