

P 970000 54664

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

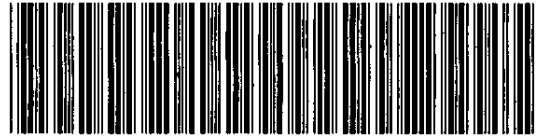
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

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*10/7/08*

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 601-615 Washington Ave., Property, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P97000054664

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:

Henriette Sostchen  
(Name of Contact Person)

601-615 Washington Ave., Property, Inc.  
(Firm/Company)

3191 Coral Way #1008  
(Address)

Miami, FL 33145  
(City/State and Zip Code)

For further information concerning this matter, please call:

Henriette Sostchen at ( 305 ) 476-7767  
(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

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

- 1. The name of the corporation: 601-115 Washington Ave., Property, Inc.
2. The principal office address: 3191 Coral Way Suite #1008 Miami, FL 33145
3. The mailing address (if different):

4. Date of incorporation/qualification: 6/20/1997 Document number: P97 000054664

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Henrietta Sostchin
640 NE 176 Street
Miami Beach, FL 33162

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

Henrietta Sostchin
3191 Coral Way #1008
Miami, FL 33145

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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

Burt Sostchin President
(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

9/24/2001
(Date)

If signing on behalf of an entity:

Henrietta Sostchin
(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