## P980000/3949

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Do	cument Number)				
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
,					

Office Use Only

11.8-10



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## **COVER LETTER**

		•				
TO:	Amendment Section Division of Corporations		. K			
		VRMC MARBI	FINC 3			
SUBJ	ECT:	Name of Co	poration			
DOCU	JMENT NUMBER:	P980	00013949			
The er	closed Statement of Change	of Registered Office/	Agent and fee are submi	tted for filing.		
Please	return all correspondence co	oncerning this matter t	o the following:			
		RITA VEF	RZURA			
		Name of Cont	act Person			
		VRMC MAR				
		. Firm/Con	npany			
		21490 W. DI				
	*	Addre	ess			
	•	•				
		MIAMI, FL 33	3180-1144	•		
	MIAMI, FL 33180-1144 City/State and Zip Code					
		RITA@VERZI	IDA COM			
	E-mail addres		ture annual report noti	fication)		
			·	•		
For fu	rther information concerning	g this matter, please ca	II:			
	RITA VERZU	JRA	at ( 786 )	489-1949		
	Name of Contact P	erson	Area Code & Dayt	489-1949 ime Telephone Number		
Enclos	sed is a \$35.00 check made	payable to the Departn	nent of State.			
	Mailing A	Address:	Street Address			
	Amendm	ent Section	Amendment S			
	Division P.O. Box	of Corporations	Division of Co	•		
		see, FL 32314	Clifton Buildi	ng ve Center Circle		
	i ananas	500, I'L J2J14	Tallahassee F			

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

statement of cha	nge is submitted for a corp	poration organize	607.1508, or 617.1508, Flo d under the laws of the Stat	e of FCORIOA
in orde	er to change its registered o	office or registere	d agent, or both, in the State	e of Florida.
	the corporation: VRMC			
	office address: 21490 V	V. DIXIE HWY		
3. The mailing a	address (if different):			·
4. Date of incor	poration/qualification:	2/11/98	Document number:	P98000013949
	d street address of the curre rtment of State: (If resigned		nt and registered office on fi	ile with the
	RITA VERZURA			
	20885 NE 31ST PL	ACE		FG &
	AVENTURA, FL 33	180		_
6. The name and (if changed):	d street address of the new	registered agent (	if changed) and /or registere	ed officer P 3:
	RITA VERZURA			
	21490 W. DIXIE HV			
	MIANI EL 22102 1:	P.O. Box NOT a	cceptable	
	MIAMI, FL 33180-1	<del></del>		
The street address changed will	ess of its registered office I be identical.	and the street ad	dress of the business offic	e of its registered agent,
Such change wauthorized by t	as authorized by resolution he board, or the corporation	on duly adopted bon has been notif	by its board of directors or need in writing of the chang	by an officer so te.
Signatu	le of an officer or director		VITO VERZU Printed or typed nam	
I further agree of my duties, ar document is be	t the appointment as regis to comply with the provis nd I am familiar with and ing filed merely to reflect s been notified in writing	ions of all statute accept the oblige a change in the i	agree to act in this capacit s relative to the proper an ation of my position as reg registered office address, I	y. id complete performance istered agent. Or, if this hereby confirm that the
/ hlli	2		11/2/	10
	gnature of Registered Agent		Date	
It signing on be	ehalf of an entity:			
1	Typed or Printed Name	<del></del>		

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