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COVER LETTER

Division of Corporations			
SUBJECT: Diamelyn Offero, P. Name of Corporation	A ·		
DOCUMENT NUMBER: \$ 09 0 000 87092			
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:			
Thouse retain an earrespondence concerning this matter to the following.			
Diametr Cape	w		
Name of Contact Person			
Signelyn Chaevo, P. A. Firm/Company			
SS Merrich way Ste 402			
Coral Gables, Fl. 33134 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Diguestina Care.co	C , 7/6-7881		
Name of Contact Person at (78)	Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: S	treet Address:		
Amendment Section A	mendment Section		
•	Division of Corporations		
***************************************	lifton Building 661 Executive Center Circle		
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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 Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Diamelyn Open, P. A.
2. The principal office address: SS Mem 2k way Ste. 402 Coval tables, Fl. 33134
3. The mailing address (if different): Sa we
4. Date of incorporation/qualification: 10 2009 Document number: PO 0000 7092
5. The name and street address of the current registered agent and registered office on file will a Florida Department of State: (If resigned, enter resigned)
Diawelyn Openo, Esq.
coval fiables, FL. 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Dignelyn Cepero, Esq.
55 Merrick way Ste. 402 P.O. Box NOT acceptable
Coval fightes, FC. 33134
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 Signature of an officer or director Signature of an officer or director 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.
8-25-14
Signature of Registered Agent Date
If signing on behalf of an entity:

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

Typed or Printed Name