## P16000037728

(Re	equestor's Name)	
(Ac	ldress)	
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(C	ty/State/Zip/Phone	e #)
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JUL 21 2016

C. CARROTHERS

SECVETARY OF STATE

## **COVER LETTER**

Division of Corporations			
SUBJECT: 2M Investments, INC. Name of Corporation			
DOCUMENT NUMBER: P16 0000 37728			
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:			
MARIO GARCIA  Name of Contact Person			
Name of Contact Person			
2M Investments, INC.			
222 nd			
11824 SW 232 - Lane			
Address			
MIAMI FL 33032 City/State and Zip Code			
oliverpoolfloride Comzil.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
MARIO GARCIA at (954) 326 6459  Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address:  Street Address:			
Amendment Section Amendment Section Division of Corporations Division of Corporations			
- 1			

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

## , 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 \tau LOP_DA \\ in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 2M Investments, INC.
2. The principal office address:
3. The mailing address (if different): 11824 SW 232 LANE
MIAMI FL 33032
4. Date of incorporation/qualification: Document number: P1600053772
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
MARIO E GARCIA
2366 SW 10th street
MIAMI FL 33135
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    MARIO E GARCIA   1824 Sw 232 LANE   P.O. Box NOT acceptable   P.O. Box NOT acceptable
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 arrollicer or director  MARIO E GARGA PRESI DENT Printed or typed name and title
Signature of an object or director  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 Date
If signing on behalf of an entity:
Typed or Printed Name

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