

PD50000 30147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400325099664

02/22/19--01025--009 **

2019 FEB 22 PM 4:51
CITIZENSHIP DIVISION

RA/RO/ch

FEB 27 2019
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **BANESCO USA**

Name of Corporation

DOCUMENT NUMBER: **P05000030147**

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:

DAYLI BETANCOURT

Name of Contact Person

JONES WALKER, LLP

Firm/Company

201 S BISCAYNE BLVD, SUITE 2600

Address

MIAMI, FL 33131

City/State and Zip Code

DBETANCOURT@JONESWALKER.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAYLI BETANCOURT

Name of Contact Person

at (**305**) **679-5733**

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 FOR
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: BANESCO USA
2. The principal office address: 150 ALHAMBRA CIRCLE, SUITE 1000, CORAL GABLES, FLORIDA 33134
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/1/2005 Document number: P05000030147

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)

REGISTERED AGENT CORPORATE SERVICES, INC.

355 ALHAMBRA CIRCLE, SUITE 801

CORAL GABLES, FL 33134

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

ENTITY REGISTERED AGENT, LLC C/O JUAN E. SERRALLES

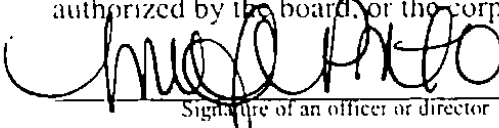
201 S BISCAYNE BLVD, SUITE 2600

P.O. Box NOT acceptable

MIAMI, FL 33131

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

Jennifer Plato Branch Quality

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

2/7/19

Date

If signing on behalf of an entity:

Juan E. Serralles

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