N2000006841

(Requestor's Name)	_
(Address)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
	_
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	7
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	-

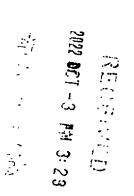
Office Use Only



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2022 OCT -3 AM 9: OT CONTINUE OF STATE

220CT -3 AM 9:01



A. BUTLER

OCT - 4 2022

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195								
REFERENCE : 875018 8277271								
AUTHORIZATION :								
COST LIMIT : \$ 13.51.00								
ORDER DATE : August 10, 2022								
ORDER TIME : 1:58 PM								
ORDER NO. : 875018-005								
CUSTOMER NO: 8277271								
CHANGE OF AGENT								
NAME: EDUARDO ESCOBAR FAMILY FOUNDATION, INC.								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY								
XX PLAIN STAMPED COPY								
CONTACT PERSON: Alexxis Weiland EXT#								

EXAMINER:

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

statement of cha	provisions of sections 607.050. nge is submitted for a corpora to change its registered office	tion organized	under the law	vs of the State	of Florid	la		
	he corporation: EDUARDO E office address: 7950 NW 155T							
3. The mailing a	ddress (if different):							
4. Date of incorp	oration/qualification: 06/24/20	020	_ Document n	number: _N20	0000068	41		
5. The name and	street address of the current re tment of State: (If resigned, en	egistered agent						
	DJ RENGIFO Y ASSOCIATI	ES, LLC						
	7950 NW 155TH ST SUITE	204			() s	20.		
	MIAMI LAKES, FL 33016				ALL	22 OC	11.mm	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office							
	Corporation Service Compar	ny		· ,	ाँ ऽ 	بو		
	1201 Hays Street				m m	10		
	P.O. Box NOT acceptable							
	Tallahassee	<u> </u>	FL	32301				
The street addre as changed will	ss of its registered office and be identical.	the street addi	ress of the bus	siness office	of its regi	stered	agent,	
Such change wa authorized by th	s authorized by resolution dul e board, or the corporation ha	ly adopted by is been notifie	its board of d d in writing o	irectors or by	y an office	er so		
En	an John	_ Ev	an Jehle					
	e of an officer or director			ed or typed name				
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registerea o comply with the provisions d I am familiar with and acce ng filed merely to reflect a cho been notified in writing of thi	l agent and ag of all statutes pt the obligati ange in the reg is change.	ree to act in I relative to the on of my posi gistered office	this capacity. e proper and ition as regis e address, I h	complete tered ager ereby con	perfor nt. Or nfirm th	mance if this iat the	
By: Mexx	is wind, Avp.	10	/03/2022					
Sign	nature of Registered Agent			Date				
If signing on bel	nalf of an entity:							
Tv	med or Printed Name							

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