P00000118044

| * (R | Requestor's Name |) |
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| (A | ddress) | |
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| ν- | (duress) | |
| (C | city/State/Zip/Pho | ne #) |
| PICK-UP | WAIT | MAIL |
| (B | Business Entity Na | ame) |
| · | | · |
| (C | ocument Numbe | r) |
| Certified Copies | Certificate | es of Status |
| Special Instructions to | a Eiling Officer | |
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Office Use Only

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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: MICHAEL MIVER P.A. (Name of corporation) DOCUMENT NUMBER: POUDO 118044 |
| 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: |
| (Name of person) |
| Mi Mill Mirer, PA (Name of firm/company) |
| 8USW 8m St, Ste 2803 (Address) |
| Milmi, 12 33130 (City/state and zip code) |
| For further information concerning this matter, please call: |
| (Name of person) at (305) 530-U177 (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
409 E. Gaines Street
Tallahassee, FL 32399

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: MIChael Mirer, PA. |
| 2. The principal office address: 80 SW 8th St. Suite 2803 |
| Miani, FL 33130 |
| 3. The mailing address (if different): |
| / (20) |
| 4. Date of incorporation/qualification: $12/29/00$ Document number: $POUO1180^2$ |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Michael Micer |
| 777 Buller 1 Ale Or 111d |
| MIL 01 (1 2-2) 3 |
| - THUMI FL 75/5/ |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if |
| changed): Michael Miver |
| Brickell Bayview Centre # 3 17 |
| (P.O. Box or personal mailbox NOT acceptable) |
| Hiawi, 16 33 30 |
| 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. |
| Alica Mirer J. P. |
| (Signature of an orficer, chairman or rice chairman of the board) I have by advent the convenient and account and account and account the convenient and account and account the convenient and account and account and account and account the convenient and account and account and account the convenient and account and account the convenient and account account and account account and account account account and account and account account account and account account account account and account accoun |
| 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. |
| 11/11/ |
| (Date) |
| If signing on behalf of an entity: |
| (Typed or Printed Name) (Capacity) |