4800 SW 74 C MIAMI, FL 33				
Current Ma	ling Address:			
4800 SW 74				
MIAMI, FL	33155			
FEI Number: 59-1100691		Certificate of Status Desired: Yes		
Name and A	Address of Current Registered Agent:			
FOSSLER, MIC 4800 SW 74 C MIAMI, FL 331				
The above name	d entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of	Florida.
	d entity submits this statement for the purpose of changing its reg E:	istered office or regis	tered agent, or both, in the State of	Florida. 01/22/2019
		istered office or regis	tered agent, or both, in the State of	
SIGNATURI	E: MICHAEL L. FOSSLER	istered office or regis	tered agent, or both, in the State of	01/22/2019
SIGNATURI	E: MICHAEL L. FOSSLER Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of	01/22/2019
SIGNATURI Officer/Dire	E: MICHAEL L. FOSSLER Electronic Signature of Registered Agent Ctor Detail :			01/22/2019
SIGNATURI Officer/Dire	E: MICHAEL L. FOSSLER Electronic Signature of Registered Agent Ctor Detail : STD	Title	PD	01/22/2019
SIGNATURI Officer/Dire Title Name	EIECTRONIC SIGNATURE OF REGISTERED Agent CTOR Detail : STD SUAREZ JR, ENRIQUE 4800 SW 74 CT	Title Name	PD FOSSLER , MICHAEL L. 4800 SW 74 CT	01/22/2019
SIGNATURI Officer/Dire Title Name Address	EIECTRONIC SIGNATURE OF REGISTERED Agent CTOR Detail : STD SUAREZ JR, ENRIQUE 4800 SW 74 CT	Title Name Address	PD FOSSLER , MICHAEL L. 4800 SW 74 CT	01/22/2019
SIGNATURI Officer/Dire Title Name Address City-State-Zip:	E: MICHAEL L. FOSSLER Electronic Signature of Registered Agent Ctor Detail : STD SUAREZ JR, ENRIQUE 4800 SW 74 CT MIAMI FL 33155	Title Name Address	PD FOSSLER , MICHAEL L. 4800 SW 74 CT	01/22/2019
SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : STD SUAREZ JR, ENRIQUE 4800 SW 74 CT MIAMI FL 33155 V	Title Name Address	PD FOSSLER , MICHAEL L. 4800 SW 74 CT	01/22/2019

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: MICHAEL L. FOSSLER

Electronic Signature of Signing Officer/Director Detail

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: HUFSEY- NICOLAIDES-GARCIA-SUAREZ ASSOCIATES, INC.

DOCUMENT# 291815

Current Principal Place of Business:

01/22/2019

Date