The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

# SIGNATURE:

	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	D	Title	D
Name	WALD, JONATHAN D	Name	GONZALEZ, ESTRELLA F
Address	2 SOUTH BISCAYNE BLVD., SUITE 3599	Address	2 SOUTH BISCAYNE BLVD., SUITE 3599
City-State-Zip	5: MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

Title D Name GRAFF, ROBERT M 2 SOUTH BISCAYNE BLVD., SUITE Address 3599 City-State-Zip: MIAMI FL 33131

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.

DIRECTOR

#### SIGNATURE: JONATHAN D. WALD

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P05000015904

Entity Name: WALD, GONZALEZ & GRAFF, P.A.

#### **Current Principal Place of Business:**

2 SOUTH BISCAYNE BLVD. **SUITE 3599** MIAMI, FL 33131

## **Current Mailing Address:**

2 SOUTH BISCAYNE BLVD. **SUITE 3599** MIAMI, FL 33131

### FEI Number: 20-2247460

#### Name and Address of Current Registered Agent:

CMS INTERNATIONAL ENTERPRISES, INC 550 BILTMORE WAY SUITE 200 CORAL GABLES, FL 33134 US

FILED Jan 05, 2017 Secretary of State CC9313426248

Certificate of Status Desired: Yes

01/05/2017

Date