# above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000148612

Entity Name: HINCALIGHT, CORPORATION

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

200 CRANDON BLVD 200 KEY BISCAYNE, FL 33149

#### **Current Mailing Address:**

200 CRANDON BLVD 200 KEY BISCAYNE, FL 33149 US

#### FEI Number: 56-2544252

## Name and Address of Current Registered Agent:

VELASCO, ANGEL 200 CRANDON BLVD 200 KEY BISCAYNE, FL 33149 US

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	: ANGEL VELASCO			11/13/2018
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P	Title	VP	
Name	VELASCO, ANGEL M	Name	HINCAPIE, GLORIA	
Address	200 CRANDON BLVD 200	Address	200 CRANDON BLVD 200	
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149	

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 SIGNATURE: ANGEL M VELASCO

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

PRESIDENT

11/13/2018

FILED Nov 13, 2018 Secretary of State CC3416493262

Certificate of Status Desired: No

Date