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: SEBASTIAN D MARQUEZ

Electronic Signature of Signing Officer/Director Detail

Entity Name: A.M. CUSTOM DESIGN FURNITURE CORP. **Current Principal Place of Business:**

DOCUMENT# P10000054669

4700 NW 128TH ST RD MIAMI. FL 33054

Current Mailing Address:

4700 NW 128TH ST RD MIAMI, FL 33054 US

FEI Number: 27-3183954

Name and Address of Current Registered Agent:

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

MARQUEZ, SEBASTIAN D 1579 NE 175TH STREET NORTH MIAMI BEACH, FL 33162 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:

The above hamed entity	the purpose of change	registered agent, or both,	

Date Electronic Signature of Registered Agent **Officer/Director Detail :** Title PD Title S MARQUEZ, SEBASTIAN D Name ALBERTO, SILVIA Name 1579 NE 175TH STREET Address 17011 N BAY ROAD APTO 205 Address City-State-Zip: NORTH MIAMI BEACH FL 33162 City-State-Zip: SUNNY ISLES BEACH FL 33160

Certificate of Status Desired: No

04/24/2015

Date