## 63089

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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TALLAHASSEE TSTALL

JAN N

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT:	Alvi, Inc.	ration		
DOCUMENT NUMBER:	630	689		
The enclosed Statement of Change	of Registered Office/Ag	ent and fee are submitted for filing.		
Please return all correspondence cor	ncerning this matter to the	ne following:		
Sofia Powell-Cosio Esq				
<del></del>	Name of Contact	Person		
	0-5- 0 - 110	· D4		
Sofia Powell-Cosio PA Firm/Company				
		9		
	1900 S.W. 3rd.	Avenue		
	Address			
Miami, FL 33129 City/State and Zip Code				
City/State and Zip Code				
sofiapc@aol.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Sofia Powell-Co	esio at	( 305 ) 579 9988		
Name of Contact Per	aı	Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.				
P.O. Box 6	nt Section f Corporations 327	Street Address: Amendment Section Division of Corporations Clifton Building		
Tallahasse	e, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

CR2E045 (8/05)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta nge is submitted for a corporation organized under the laws of the State of Fl r to change its registered office or registered agent, or both, in the State of Flo	orida
	he corporation: Alvi, Inc.	
	office address: 550 Ocean Dr. 8-E	
z. me pinterpar	Key Biscayne, FL 33149	
3. The mailing ac	ddress (if different): same	
4. Date of incorp	oration/qualification: 7/25/1979 Document number:	630689
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	the
	Paul D. Barns, Jr (resigned)	•
	550 Ocean Dr. 8-E	٠
	Key Biscayne, FL 33149	O FT SEC
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offic	RETARY OF PERSON
	Sofia Powell-Cosio	ETION AT
	1900 S. W. 3rd. Avenue	92 2
	P.O. Box NOT acceptable	
	Mami, FL 33129	
The street addre	s of its registered office and the street address of the business office of its beliden ical.	registered agent,
_	s atthorized by resolution duly adopted by its board of directors or by an or the corporation has been notified in writing of the change.	
	Pedro Alvarez - Director/Vi	
I hereby accept I further agree to of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and completed in this capacity. If a complete in the proper and completed in the familiar with and accept the obligation of my position as registered in gilled merely to reflect a change in the registered office address, I hereby been notified in writing of this change.	plete performance agent. Or, if this confirm that the
Some?	January 26, 200	9
λ	half of an entity:	
	ofia Powell-Cosio	
•	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314