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CORPORATION NAME(S) & 1	DOCUMENT NUMBER(S), (if k	nown):
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NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS  Annual Report	AMENDMENTS  Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger  REGISTRATION/QUA Foreign	ALIFICATION AND SALVE SA
Fictitious Name	Limited Partnership Reinstatement Trademark Other	

CR2E031(7/97)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of <u>Washington D.C.</u> submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: IBERAMIC, INC.
2. The mailing address of the corporation: 156 ALMERIA AUE, SUITE ZOI  CORAL GARLES, FL 33134
3. Date of incorporation/qualification: 7/13/98 Document number: F0/00000 528
4. The name and address of the current registered agent and office:
CORPORATE ACCESS, INC.
236 EAST 6th AVE.
TALLAHASSEE, FL 32303
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)
Mark S. Feluren, Esq.
2200 North Commerce Parkway, Suite 202
Weston, FL 33326-3258
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
((Signature of an officer, chairman or vice chairman of the board) ((Date)
((Signature of an officer, chairman or vice chairman of the board) (Date)
INMA ROCA, VICE PRESIDENT (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this sapacity. I further agree to comply with the provisions of all statutes relative to the proper and complete to performance of my duties, and a manifiar with and accept the obligation of my position is
reğistered agent. 1-18-02 REFINAL N
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)