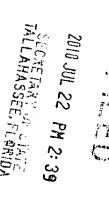
## FOKWW6383

(Requestor's Name)			
(Address)	900183440039		
(Address)	000100110000		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)	07/22/1001031001 **35.00		
· (Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only

1, 22,0



## **COVER LETTER**

TO:	FO: Amendment Section Division of Corporations					
SUBJE	ECT: <u> </u>	IRSTBANK PUERTY	O RICO Name of Corpor	ation		
DOCU	IMENT NUM	BER: F04000	004283			
The en	closed Stateme	ent of Change of Registe	ered Office/Age	ent and fee are submitted for filing.		
Please	return all corre	espondence concerning t	his matter to th	e following:		
		Michele B. S	Softness,	Esq.		
	Name of Contact Person					
Isicoff, Ragatz & Koenigsberg Firm/Company						
		1200 Brickell	l Avenue,	Suite 1900		
	Address					
	Miami, FL 33131					
City/State and Zip Code						
	softness@irlaw.com					
	E-mail address: (to be used for future annual report notification)					
For furt	ther information	on concerning this matter	r, please call:			
		. Softness	·			
	Name	of Contact Person	at	(305 ) 373-3232 Area Code & Daytime Telephone Number		
Enclose	ed is a \$35.00 (	check made payable to the	he Department	of State.		
		Mailing Address: Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	ations	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## 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, this statement of change is submitted for a corporation organized under the laws of the State of Common Wealth of Puerto Rico in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: FIRSTBANK PUERTO RICO 2. The principal office address: 701 Waterford Way, Suite 800, Miami, FL 33126 3. The mailing address (if different):\_ 4. Date of incorporation/qualification: 7/23/04 \_\_\_\_ Document number: \_\_ F04000004283 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Corporation Company of Orlando 300 South Orange Avenue, Suite 1000 Orlando, Florida 32801-5403 US 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Katarina Gonzales 701 Waterford Way, Suite 800 P.O. Box NOT acceptable Miami, FL 33126 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 poard, or the corporation has been notified in writing of the change. Sara Alvarez-Cabrero, VP and Corporate Affairs Officer I hereby accept the appointment as registered agent and agree to act in this capacity.

I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has feel grafted in writing of this change. Signature of Registered Agent If signing on behalf of an entity:

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

TARINA J. 6M2