F0500000 3652

(Re	questor's Name)	
(Address)		
(Add	dress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		





500064720915

01/31/06--01018--011 **35.00

FILED

SECRETARY OF STATE

SECRETARY OF STATE

Rocky of

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: C.A.M.& ASSOCIATES REALTY, CO	ORP ration)
DOCUMENT NUMBER: F05000003652	
The enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.
Please return all correspondence concerning this matter to the	he following:
CARLOS A. MORALES, SR (Name of Contact	Person)
C.A.M. & ASSOCIATES REALTY, (Firm/Compa	
3996 CLAIRMONT RD (Address)	
ATLANTA, GA 30341 (City/State and Zi	p Code)
For further information concerning this matter, please call:	
CARLOS A. MORALES, SR (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departmen	t of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	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, F statement of change is submitted for a corporation organized under the laws of the Statement to change its registered office or registered agent, or both, in the Statement of the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, F	tate of GEORGIA			
1. The name of the corporation: C.A.M. & ASSOCIATES REALTY, CORP. 257 14.	J			
The principal office address: 3996 CLAIRMONT RD ATLANTA, GA 30341				
3. The mailing address (if different):				
4. Date of incorporation/qualification: 06/16/2005 Document number: F	05000003652			
5. The name and street address of the current registered agent and registered office or Florida Department of State:	a file with the			
CESAR F. MORALES				
1029 EUCLIDE AVE	1029 EUCLIDE AVE			
MIAMI BEACH, FL 33319	MIAMI BEACH, FL 33319			
6. The name and street address of the new registered agent (if changed) and /or regist (if changed):	- m -			
CESAR F. MORALES	FLORI			
1749 NE MIAMI CT #206	DM			
(P.O. Box NOT acceptable) MIAMI, FL 33132				
The street address of its registered office and the street address of the business off as changed will be identical.	fice of its registered agent,			
Such change was authorized by resolution duly adopted by its board of directors authorized by the board, or the corporation has been notified in writing of the cha	or by an officer so inge.			
(Signatury of an officer of an ector) CARLOS A. MORALE (Printed or typed)	name and title)			
I hereby accept the appointment as registered agent and agree to act in this capa I further agree to comply with the provisions of all statutes relative to the proper of my duties, and I am familiar with and accept the obligation of my position as r document is being filed merely to reflect a change in the registered office address corporation has been notified in writing of this change.	city. and complete performance egistered agent. Or, if this t, I hereby confirm that the			
Clear F Malw 01/27/2006 (Signature of Registered Agent) (Date)			
If signing on behalf of an entity:				
C.A.M. & ASSOCIATES REALTY, CORP				

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

(Typed or Printed Name)