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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : JAM MARK LIMITED Account Number : 120000000112 Phone : (305)739-7758 : (305)789-7799 Fax Number

\*\*Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please. \*\* Address: mario.otero@baleariacaribbean.com

## REGISTERED AGENT CHANGE BALEARIA CARIBBEAN LTD., CORP.

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JUL 2 5 2019

To.



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

statement of cha	provisions of sections 607.0502, 6 nge is submitted for a corporation r to change its registered office or	organized under the laws of t	he XXXXXX Bahamas
			•
1. The name of	he corporation: BALEARIA C	ARIBBEAN LTD., CC	)KP.
2.The principal	office address: 3300 SW 13 A	Avenue, Ft. Lauderdal	e, FL 33315
3.The mailing a	ddress (if different):		
4.Date of incorp	oration/qualification: 06/28/20	Document number	F11000002661
5. The name and	street address of the current regis tment of State: (If resigned, enter t	tered agent and registered offi	ce on file with the
	Corporate Creations Net	work Inc.	
	11380 Prosperity Farms	Road, #221E	
	Palm Beach Gardens, F	L 33410	
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or r	
	Mario Otero		
	3300 SW 13 Avenue		55.7
	Ft. Lauderdale, FL 3331	ov NOT acceptable	
The street address changed will	ss of its registered office and the be identical.		<del></del>
Such change wa authorized by th	s authorized by resolution duly ac the board, or the corporation has be	lopted by its board of directo cen notified in writing of the	rs or by an officer so change.
		José Herrero - CEO B	alearia Caribbean
- · · · ·	re of an officer or duector		ed name and title
I hereby accept I further agree performance of agent. Or, if the hereby confirm	the appointment as registered ago o comply with the provisions of a my duties, and I am familiar with is document is being filed merely i that the corporation has been not	ent and agree to act in this call statutes relative to the prop and accept the obligation of or reflect a change in the reg ified in writing of this change	macity, per and complete my position as registered istered office address, I z.
		07/18/2019	
Sign	inture of Registered Agent	13	Pate
lf signing on be	half of an entity:		
T	eped or Printed Name		
	* * * FILIN	G FEE: \$35.00 * * *	