

Mar. 1. 2017 10:01AM

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No. 1849 P. 1

F170000000423

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : A. GARCIA & CO., P.A.
Account Number : I20000000094
Phone : (305)273-6525
Fax Number : (305)273-6564

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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REGISTERED AGENT CHANGE
GEOFI INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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No. 1849 P. 2

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
(((H17000057430 3))) 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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GEOFI, INC
2. The principal office address: 3401 N. MIAMI AVENUE SUITE 205
MIAMI, FL 33127
3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 01/27/2017 Document number: F17000000423

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)

JOSE VARGAS

3401 N. MIAMI AVENUE, SUITE 205

MIAMI, FL 33127

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JOSE VARGAS

3401 N. MIAMI AVENUE, SUITE 205

P.O. Box NOT acceptable

MIAMI, FL 33127

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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, or the corporation has been notified in writing of the change.


Signature of an officer or director

JOSE VARGAS, DIRECTOR

Printed or typed name and title

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 been notified in writing of this change.


Signature of Registered Agent

03/01/2017

Date

If signing on behalf of an entity:

JOSE VARGAS

Typed or Printed Name

*** 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 (03/12)