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(City/State/Zip/Phone #)	100033554+111+1
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COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: MARCO DE LA CAL, P.A. Name of Corporation G99035 DOCUMENT NUMBER The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCO DE LA CAL
Name of Contact Person
MARCO DE LA CAL, P.A.
Firm/Company
999 Ponce De Leon Blvd., #735
Address
Coral Gables, Florida 33134
City/State and Zip Code
Marco@delacalpa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marco de la Cal

Name of Contact Person

305 444-3800 Area Code & Daytime Telephone Number at (

Enclosed is a \$35.00 check made payable to the Department 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

1. The name of the corporation	MARCO [DE LA (CAL, P.A.
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2. The principal office address: 999 Ponce De Leon Boulevard, Suite 735 Coral Gables, Florida 33134

3. The mailing address (if different):____

4. Date of incorporation/gualification: 02/07/1984	Document number: G99035
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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)

MARCO DE LA CAL

999 Ponce De Leon Boulevard, Suite 735

Coral Gables, Florida 33134

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

MARCO DE LA CAL		
1313 Ponce De Leon Boulevard, Suite 200		

P.O. Box NOT acceptable

Coral Gables, Florida 33134

Signature of an officer or director

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

Marco	de	la	Cal,	President
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Printed or typed name and title

I hereby accept the appointment as registered a I further agree to comply with the provisions of performance of my attles, and I am familiar wit agent. Or, if this document is being filed merely hereby confirm that the corporation has been no	all statutes relative to the proper and complete th and accept the obligation of my position as registered y to reflect a change in the registered office address. I
	August 12, 2019
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Marco de la Cal	
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)