K31159

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Ohani Alawany TIC Name of Corporation
DOCUMENT NUMBER: K 31159
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:
Name of Contact Person
For further information concerning this matter, please call:
Villey Volks Name of Contact Person at (305) 359-1402 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State

closed 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

Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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 \(\frac{1}{2}\) (\tau \tau \tau \tau) in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Manie Marcoem at Inc	
2. The principal office address: 14275 SW 142 AR	
Mani FL 33186	
3. The mailing address (if different):	
4. Date of incorporation/qualification: <u>\$17.58</u> Document number: <u>K31159</u>	
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)	
Cathie Carr	
11070 US Hidway Or #301E 50	
Palm Berch Grobers FL 33408 PR 37	
6. The name and street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed):	
THE ME IN THE	
11970 US HIGHWAY ONE Surle 501 FA S.	
Palin Brack Crambis, FL 33408	
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 Signature of an officer or director Printed or typed name and title	de7
Signature of an officer or director 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.	
9-18-27)	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Yang	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 5 (04/13)

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