

L14000073309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

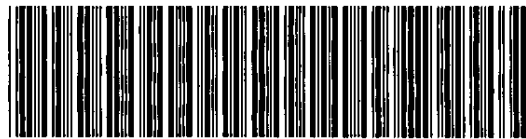
(Business Entity Name)

(Document Number)

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C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Koi Studio Miami

Name of Corporation

DOCUMENT NUMBER: L14000073309

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:

Katherine Malaga

Name of Contact Person

Koi Studio Miami

Firm/Company

5753 nw 100th Ct

Address

Doral Florida 33178

City/State and Zip Code

info@koistudiomiami.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Katherine Malaga

Name of Contact Person

at (**305**) **2188190**

Area Code & Daytime Telephone Number

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

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: Koi Studio Miami
2. The principal office address: 8181 nw 14th Street Doral Florida 33126
3. The mailing address (if different): 5753 NN 100Th Ct Doral Florida 33178
4. Date of incorporation/qualification: 05/06/2014 Document number: L14000073309
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)

Andres Mendez

5753 NW 100TH CT DORAL, FL 33178

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

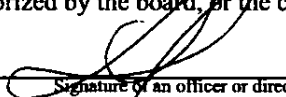
Katherine Malaga

5753 NW 100TH CT DORAL, FL 33178

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

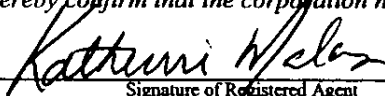
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Andres Mendez • President

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

07/23/2014

Date

If signing on behalf of an entity:

Katherine Malaga

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)

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JUL 28 PM 12:29
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