## 140508

(Re	questor's Name)				
(Ad	dress)				
bA)	dress)				
(Cit	y/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Bu	siness Entity Name)				
(Document Number)					
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## **COVER LETTER**

TO:	Amendment Sec Division of Cor		•		
SUBJ	JECT:	IPACO,	INC.		
		Name of	Corporation	on	
DOC	UMENT NUMBI	ER:	L40508	3	
The e	nclosed Statement	of Change of Registered Off	ice/Agent a	and fee are subm	itted for filing.
Please	e return all corresp	ondence concerning this matt	ter to the fo	ollowing:	
		Edward	d Aceved	0	
		Edward Name of C	ontact Per	son	
IPACO, INC.					
	<u></u>	Firm/	Company		<del></del>
		40220	Eronio D	J	
			Franjo Ro Idress	J	<del></del>
		Palmetto B City/State		3157: 2	·
	— E ~	ea@ipail address: (to be used for	aco.com	nual report noti	ification
	E-II	ian address: (to be used for	Tutuic an	nuar report noti	meation)
For fi	urther information	concerning this matter, please	e call:		
	Edw	ard Acevedo	at (	305	251-5060 time Telephone Number
	Name of	Contact Person	A	rea Code & Dayt	ime Telephone Number
Enclo	sed is a \$35.00 ch	eck made payable to the Depa	artment of	State.	
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment S Division of C Clifton Buildi 2661 Executiv Tallahassee, F	Section orporations ing ve Center Circle

## 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.	
2. The principal office address: 18320 Franjo Rd. Palmetto Bay, FL. 33157	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 1/2/1990 Document number: L40508	
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)	
Edward Acevedo	
7700 N. KENDALL DR. SUITE 809	
MIAMI, FL. 33156	
6. The name and street address of the new registered agent (if changed) and /or registered office $\frac{1}{2}$	<b>!</b> :
Edward Acevedo 7: 4	
18320 Franjo Rd.  P.O Box NOT acceptable	
Palmetto Bay, FL. 33157	
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 dorporation has been notified in writing of the change.	
Signature of Active or director  Edward Acevedo - PRESIDENT Printed or typed name and title	
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.	
6/11/2009	
Signature of Resistered Agent  Date  If signing on behalf of an entity:	
Edward Acevedo Typed or Printed Name	

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