N/1000002277

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COVER LETTER

TO: Amendment Section Division of Corporations The Greater Miami Gardens Chamber of Commerce Inc. Name of Corporation N11000002277 **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: **Ula Zucker Williams** Name of Contact Person The Greater Miami Gardens Chamber of Commerce Inc. Firm/Company P.O. Box 551896 Address Miami Gardens, FL 33054 City/State and Zip Code ula@gmgcc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Ula Zucker Williams** Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: **Street Address:** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for	s 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this a corporation organized under the laws of the State of Florida error or both, in the State of Florida.
	Greater Miami Gardens Chamber of Commerce Inc. 5 NW 167TH ST., BLDG 5 SUITE 200, MIAMI GARDENS FL 33169
3. The mailing address (if different):	PO Box 551896, Miami Gardens, FL- 33054 <i>33169</i>
4. Date of incorporation/qualification	n: 03/03/2011 Document number: N11000002277
5. The name and street address of the Florida Department of State: (If re	e current registered agent and registered office on file with the signed, enter resigned)
ELBERT L. W	/ATERS
1515 NW 167	TH ST BLDG 5 SUITE 200
MIAMI GARDI	ENS FL 33169 US
6. The name and street address of the (if changed):	e new registered agent (if changed) and /or registered office
Ula Zucker Wi	lliams
1515 NW 167	TH ST BLDG 5 SUITE 200
MIAMI GARDI	P.O. Box NOT acceptable ENS FL 33169 US
The street address of its registered of as changed will be identical.	office and the street address of the business office of its registered agent,
Such change was authorized by reso authorized by the board, or the corp	olution duly adopted by its board of directors or by an officer so oration has been notified in writing of the change.
11/1.6	Ma Zucker Williams, Executive Direct
I hereby accept the appointment as I further agree to comply with the p performance of my duties, and I am agent. Or, if this document is being hereby confirm that the corporation	registered agent and agree to act in this capacity. rovisions of all statutes relative to the proper and complete familiar with and accept the obligation of my position as registered i filed merely to reflect a change in the registered office address, I i has been notified in writing of this change.
Signature of Registered Agent	lun 1/20/12
If signing on behalf of an entity:) Date
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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