

N16000008397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

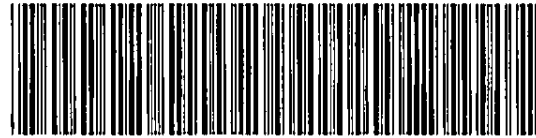
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JALMISSE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Next Generation Project INC

Name of Corporation

DOCUMENT NUMBER: N16000008397

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:

Jorge Lavoy

Name of Contact Person

Next Generation Project INC

Firm/Company

12250 SW 132nd Ct Suite 105

Address

Miami, Florida 33186

City/State and Zip Code

nextgenerationwithyou@gmail.com

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

For further information concerning this matter, please call:

Jorge Lavoy

Name of Contact Person

305 8572326

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: Next Generation Project INC
2. The principal office address: 12250 SW 132nd Ct Suite 105 Miami, Florida 33186
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/24/2016 Document number: N16000008397
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)

Jorge Lavoy

2397 Greengate Circle Apt C West Palm Beach Florida 33415

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

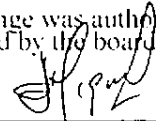
Rafael Lavoy Miguel

10010 Belle Rive Blvd Apt 1110 Jacksonville Florida 32256

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.

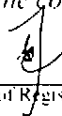


Signature of an officer or director

Jorge Lavoy 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

10/31/2017

Date

If signing on behalf of an entity:

Rafael Lavoy Miguel

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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