P00000044777

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SECRETARY OF STATE

C. GOLDEN

COVER LETTER

	ndment Section ion of Corporations		
	South Coast Title Company		
SUBJECT:_	Name of Corpo	pration	
	P00000044777		
DOCUMEN	T NUMBER:		
The enclosed	Statement of Change of Registered Office/A	gent and fee are submitted for filing.	
Please return	all correspondence concerning this matter to	the following:	
	Humberto Delgado		
	Name of Contac	t Person	
	South Coast Title Company		
Firm/Company			
7480 SW 40th Street, Suite 750			
Address			
	Miami, FL 33155		
	City/State and Z	ip Code	
	bert@southcoasttitle.com		
	E-mail address: (to be used for future	re annual report notification)	
For further in	formation concerning this matter, please call:		
Humberto I	U	305 986-2188	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a	\$35.00 check made payable to the Departme	nt 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

TO:

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida n organized under the laws of the State of r registered agent, or both, in the State of	- Florida 	,
1. The name of t	South Coast T			
2. The principal Miami, FL	office address:	Street, Suite 750		
3. The mailing a	ddress (if different):			_
4. Date of incorporation/qualification:			00044777	
	I street address of the current regi tment of State: (If resigned, enter Humberto Delgado	stered agent and registered office on file versigned)	vith the	
	9480 SW 40th Street, Suit	e 750 (typo error)	_	
	Miami, FL 33155		2016 J SECR TALLA	-بانت ا
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or registered o	JUN -4 CRETARY (AHASSEE	FILE
	Humberto Delgado			
	7480 SW 40th Street, Suite 750		2: 30 STATE LORID.	
	P.O. Miami, FL 33155	Box NOT acceptable	-	
The street addre	ess of its registered office and the be identical.	e street address of the business office of i	ts registered ager	nt,
Such change wa authorized by th	s authorized by resolution duly a board or the comoration has b	adopted by its board of directors or by an seen notified in writing of the change.	officer so	
	1 ///	Humberto Delgado, PST		
/ ~	re of an officer or director	Printed or typed name and ti		
I hereby accept I further agree to performance of agent. Or, if this hereby confirm	the appointment as registered as occupily with the provisions of my duties, and I am fapitiar with shocument is being filed merely that the corporation has been no	gent and agree to act in this capacity. all statutes relative to the proper and con h and accept the obligation of my positio to reflect a change in the registered offi otified in writing of this change.	nplete n as registered ce address, l	
4///		05/29/2018		
// Sign	nature of Registered Agent	Date		
	half of an entity:			
Humberto De	elgado 	_		
T	med or Printed Name	=		

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