

P00000086359

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : PRIME KEYS SOLUTIONS, LLC  
Account Number : I20140000094  
Phone : (305) 856-6121  
Fax Number : (305) 856-6122

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Oscantini@bellsouth.net

REGISTERED AGENT CHANGE  
MAECO, INC.

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June 8, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MAECO, INC.  
150 SE 2ND AVE  
SUITE 1110  
MIAMI, FL 33131

SUBJECT: MAECO, INC.  
REF: P00000086359

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

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Annette Ramsey  
Regulatory Specialist II

FAX Aud. #: H15000134872  
Letter Number: 315A00011946

H150001348723  
COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MAECO, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P00000086359

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:

Olga Santini  
Name of Contact Person

Prime Keys Solutions LLC  
Firm/Company

1541 Brickell Avenue Suite 1806  
Address

Miami, FL 33129  
City/State and Zip Code

osantini@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Olga Santini at ( 305 ) 856-6121  
Name of Contact Person 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

H150001348723

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: MAECO, INC.
2. The principal office address: 200 SE 1ST Street Suite 604, Miami, FL 33131
3. The mailing address (if different):

4. Date of incorporation/qualification: 9/12/20000 Document number: P00000086359

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)
R&P ACCOUNTING&TAXES, INC.
200 SE 1ST STREET, SUITE 604
MIAMI, FL 33131

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
PRIME KEYS SOLUTION LLC
1541 BRICKELL AVENUE SUITE 1806
MIAMI, FL 33129

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, of the corporation has been notified in writing of the change.

Signature of an officer or director

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

Date: 05/06/15

If signing on behalf of an entity:

Typed or Printed Name

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