

PO00000092430

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 2, 2004

BERTHA ROCHA
NICAMERICA FINANCIAL GROUP, INC.
6073 N.W. 167TH ST., UNIT C-7
MIAMI, FL 33015

SUBJECT: NICAMERICA FINANCIAL GROUP, INC.
Ref. Number: P00000092430

We have received your document for NICAMERICA FINANCIAL GROUP, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6882.

Maryanne Dickey
Document Specialist

Letter Number: 204A00067630

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NiCAmerica Financial Group Inc.
(Name of corporation)

DOCUMENT NUMBER: P00000092430

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:

Bertha Rocha
(Name of contact person)

NiCAmerica Financial Group Inc.
(Firm/Company)

6073 NW 167th Street Unit C-7
(Address)

MIAMI FL 33015
(City/state and zip code)

For further information concerning this matter, please call:

Bertha Rocha at (305) 403-0914
(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
409 E. Gaines Street
Tallahassee, FL 32399

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: NIC America Financial Group Inc.
2. The principal office address: 6073 NW 167th Street Unit C-7
Miami FL 33015
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9-29-2000 Document number: P00000092430

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Ramon Hernandez
7601 W. Flagler St., STE 212
Miami FL 33144

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

Bertha Rocha
6073 NW 167th Street Unit C-7
Miami FL 33015
(P.O. Box NOT acceptable)

STATE
TALLAHASSEE,
FLORIDA

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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]
(Signature of an officer or director)

Bertha Rocha 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]
(Signature of Registered Agent)

12-9-04
(Date)

If signing on behalf of an entity:

(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