## P01000012758

(Requestor's Name)
(Address)
(Address)
(1,001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2021 MAY -5 AM 3: 00 SECRETARY OF STATE TALLAHASSEE, FL

6/7/2/ SP

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: MAPAN CORPORATION	
Name of Corporation	
DOCUMENT NUMBER: PO1000012758	
The enclosed Statement of Change of Registered Off	fice/Agent and fee are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
ANTONIO BRUNA	
Name of Contact Person	
MAPAN CORPORATION	
Firm/Company	
2820 NW 105 AVE , DORAL	
Address	<del></del>
MIAMI, FL 33172	
City/State and Zip Code	
antonio.bruna@brunagroup.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	e call:
ANTONIO BRUNA	at (786 ) 9562177
Name of Contact Person	at (786 ) 9562177  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depa	artment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.050 ange is submitted for a corporation orga er to change its registered office or regist	nized under the laws of the State of $\overline{F}$	LORIDA	<del></del>	
	the corporation: MAPAN CORPORATIO	_	or ida.		
2. The principal	office address: 2820 NW 105 AVENUE				
DORAL, FL 331					
	address (if different): 2820 NW 105 AVE		_		
4. Date of incorp	poration/qualification: 04/20/2007	Document number: PO100001	2758		
	d street address of the current registered a rtment of State: (If resigned, enter resigne		h the		
	WAYNE RASSNER - RESIGNED				
	7700 N KENDALL DRIVE - SUITE 509				
	MIAMI, FL 33156		S	20	
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered office	ECRETA TALLAI	2021 HAY -	4
	ANTONIO BRUNA		TAS YAS	Ċη	-
	2820NW , 105 AVE DORAL		SHS FIG	¥	j
		x NOT acceptable	TA	<u>ယ</u> (၁	•
	MIAMI, FL 33172	<del></del> _	. H	00	
The street addre as changed will	ess of its registered office and the street be identical.	address of the business office of its	registered a	agent,	
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the compration has been no	d by its board of directors or by an optified in writing of the change.	fficer so		
Signatur	re of an officer or director	ANTONIO BRUNA POTO			
i Turiner agree t	the appointment as registered agent an to comply with the provisions of all stat d I am familiar with and accept the abl ng filed merely to reflect a change in th been notified in writing of this change.	utes relative to the proper and come	plete perfori agent. Or confirm th	mance if this at the	
	BIBL	APRIL 20 /2021			
Sign	nature of Registered Agent	Date			
If signing on bel	half of an entity:				
ANTONIO BRU	NA				
Ty	ped 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 (04/13)