

PO1000049251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

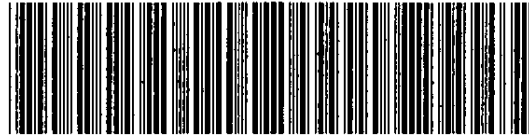
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA OM
11/13/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mickisla Corp
(Name of Corporation)

DOCUMENT NUMBER: PO100004951

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:

CHRISTIAN FORTOW
(Name of Contact Person)

Mickisla Corp
(Firm/Company)

16634 GOLF VIEW DRIVE
(Address)

WESTON, FLORIDA 33326
(City/State and Zip Code)

For further information concerning this matter, please call:

CHRISTIAN FORTOW at ()
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2008

MICRISCLA CORP.
16634 GOLFWVIEW DR
WESTON, FL 33326

SUBJECT: MICRISCLA CORP.
Ref. Number: P01000049251

We have received your document for MICRISCLA CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporation may have only one registered agent.

The registered agent must sign accepting the designation.

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) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 708A00047932

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MICRISCLA CORP.
2. The principal office address: 546 LIVE OAK LANE
WESTON, FLORIDA 33327
3. The mailing address (if different): 8360 WEST FLAGLER STREET. ST 200
MIAMI, FLORIDA 33144
4. Date of incorporation/qualification: 05/17/2001 Document number: PO100004951
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

MORELLA LANDER
546 LIVE OAK LANE
WESTON, FLORIDA 33327

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TALLAHASSEE, FLORIDA

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

MORELLA LANDER
16634 GOLF VIEW DRIVE
(P.O. Box NOT acceptable)
WESTON, FLORIDA 33326

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)

MORELLA LANDER - 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)

9/15/2008
(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
CR2E045 (8/05)