P01000091717

1528-1650 BRICKELL AVE. LOFTS ENTURE LLC. 1110 Brickell Avenue, Suite 804 Miami, FL 33131							
(Address)							
	y/state/Zip/Phone	- 41/					
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PICK-UP	☐ WAIT	MAIL					
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Omega alpha Engineering USA cor	p-
(Times of Supplianting	
DOCUMENT NUMBER: POIO COO91717	
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:	
Alfredo Arosto	
Alfredo Auosto _i (Name of person)	
Omega alpha Engineering USA Corp. (Name of firm/company)	
1110 Brickell avenue, Suite 80)4
(Address)	
22.221	
mani, FL 3313) (City/state and zin code)	
For further information concerning this matter, please call:	
To turner information concenting this matter, prease can.	
Alfredo Acosta at 305, 467 - 40 (Area code & daytime telepl	087
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Street Address: Amendment Section	
Amendment Section Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 409 E. Gaines Street Tallahassee, FL 32314 Tallahassee, FL 32399	

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

			502, 607.1508, or 6			statement of
			the laws of the State		londa	in order
to change its regi	istered office or re	gistered agent, or b	oth, in the State of F	lorida.		
1. The name of th	e corporation:	Onega	alpha 8	•		A, corp.
2. The principal of	office address:	1110 B	nickell Au	enue,	Surte 8	504
	· · · · · · · · · · · · · · · · · · ·	miami	i, PL 33	131		
3. The mailing ad	ldress (if different));				
4. Date of incorpo	oration/qualification	on: <u>09-19</u> -	2001 Document r	number:	P01000	71F1Pa
5. The name and Florida Departs		ne current registered	l agent and registere	d office on f	ile with the	
	Aws	sta, Dia	ina M.			
-	5201	Blue L	agoon Dn	ve Pe	nthouse	E4 8
-	m	uani, fi	33126			
6. The name and (if changed):	street address of th	ne new registered as	gent (if changed) and	d /or register	ed office	TARY OF
-	1110	Brickell	Avenue	Suite	2 804	FLOTA
	W	iami, FL	33131			
-		(P.O. Box or person	al mailbox NOT acceptable	e)		<i>3</i> 0
changed will be	identical.	office and the stre	et address of the bu	usiness offic	e of its registered	l agent, as
Such change was the board, or the	s authorized by re corporation has b	solution duly adop seen notified in wri	ted by its board of iting of the change.	directors or	by an officer so	authorized by
	4/7-	<u>て</u>	<u> </u>	Fredo	acosta.	President
I hereby accept to I further agree to	grown also allow or	s registered agent provisions of all s	and agree to act in tatutes relative to th tion of my position of ed office address, I	this capacit	ty. id complete perfo	ormance of my is document is oration has
oeen nonjiea in v	yriting of interche	inge. 7		to	mi moot	
	Signature of Registered	Agent)		10	(Date)	
If signing on beh	nalf of an entity:					
$\overline{}$	(Typed or Printed Name	2)			(Capacity)	

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