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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Core Contractors Corporation Name of Corporation	
DOCUMENT NUMBER: P02000116191	
The enclosed Statement of Change of Registered C	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Susana Betancourt, Esq.	<u>,</u>
Name of Contact Person	
Susana Betancourt, P.A.	
Firm/Company	
1825 Ponce de Leon Blvd., Suite 147	<u>.</u>
Address	
Coral Gables, Fl 33134	
City/State and Zip Code	
mlbetancourt@bellsouth.net	
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, ple	ase call:
Tomas Betancourt	at (786) 449-9866 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Do	epartment of State.
Mailing Address:	Street Address:
Mailing Address: Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13):

Tallahassee, FL 32314

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

statement of c	hange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	_
1. The name o	of the corporation; Core Contractors C	Corporation	
	al office address: 12321 S.W. 35 Stree		
3. The mailing	g address (if different): 4581 Weston	Road, Suite 310, Weston, FL 33331	
4. Date of inco	orporation/qualification: 10/29/2002	Document number: P02000116191	
5. The name a		tered agent and registered office on file with the	
	Susana Betancourt, Esq.	resigned) 2920.	. 1
	261 Navarre Avenue, # A101	,	•.
	Coral Gables, FL 33134	· · ·	:
6. The name a (if changed		ed agent (if changed) and /or registered office	,
	Susana Betancourt, Esq.		
	1825 Ponce de Leon Blvd., Suite 1-	47	
	Coral Gables, Florida 33134	P.O. Box. NOT acceptable	
The street add	dress of its registered office and the ill be identical.	street address of the business office of its registered ag	ent.
Such change authorized by	was authorized by resolution duly a the board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
		Tomas Betancourt, President	
I hereby acce I further agre of my duties, a document is b	e to comply with the provisions of a	Printed or typed name and title ent and agree to act in this capacity. all statutes relative to the proper and complete perform the obligation of my position as registered agent. Or, if e in the registered office address, I hereby confirm that hange.	ance this t the
Susi	ana Betancourt	6/10/2020	
:	Signature of Registered Agent	Date	_
If signing on	behalf of an entity:		
Core Contracto	ors Corporation		
	Typed or Printed Name		
	* * * FILE	NG 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)