## P03000008008

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Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: NATHAN I, INK Name of Corporation		
DOCUMENT NUMBER: P030000 8008		
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:		
Sara Tobi Lewinger  Name of Contact Person  NATHAN I. INC  Firm/Company  2600 164AND BLVD #2906  Address  AVENTURA FV 33160  City/State and Zip Code  +obilewinger @ amail.com  E-mail address: (to be used for future/annual report notification)	4 92 Mil 02 Mil 30 Mil	
For further information concerning this matter, please call:	1 02	,
Sara Tobi Liwinger at (305) 935 3096 Name of Contact Person Area Code & Daytime Telephone Nu	- <del>1</del>	.4
Name of Contact Person Area Code & Daytime Telephone Nu	ımber	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

**Street Address:** 

CR2E045 (04/13)

## $\hbox{`STATEMENT-OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS } \\$

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 FLOXIDA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: NATHAN I INC.
2. The principal office address: 2600 TSLAND BLVD, #2906
AVENTURA FL 33160
3. The mailing address (if different): \( \mathcal{N} / \mathcal{A} \)
4. Date of incorporation/qualification: $1 + N 22, 2003$ Document number: $90300008008$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  RESIGNED
MORRIS LAW GROUP
MORRIS LAW GROUP  7284 W. PALMENO POIK RD # 101  BOCA FADD FL 33433
BOCA PATON FL 33433
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  8. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ESTHER D. RUSSO
2600 ISLAND BLVD # 2906 P.O. Box NOT acceptable
P.O. Box NOT acceptable  AVENTURA FL 33/60
_ THE 107 URA PL 33/60
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 of an officer or director  Sara Tobi Lewinger  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.
Este D. A 30 6/18/20
Signature of Registered Agent Date
If signing on behalf of an entity:
ESHER D. RUSSES Typed or Printed Name

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