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COVER LETTER

то:	Amendment Section Division of Corporations				
com	Nazcaflor USA, Inc				
SUBJ	Name of Corporation				
DOCU	P03000012466 JMENT NUMBER:				
The en	iclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	Rene Kuiper				
	Name of Contact Person				
	Nazcaflor USA, Inc				
	Firm/Company				
	3024 NW 72 Avenue				
	Address				
	Miami, FL 33122				
	City/State and Zip Code				
	jackie@nazcaflor.com				
	E-mail address: (to be used for future annual report notification)				
For fu	ther information concerning this matter, please call:				
Rene	Kuiper 305 994-9233				
	Name of Contact Person Area Code & Daytime Telephone Number				
Enclos	red 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				

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

	•	817.0502, 607.1508, or 617.1508, Florida n organized under the laws of the State of		
		n organized under the laws of the State of r registered agent, or both, in the State of		_
1. The name of	the corporation: Nazcaflor USA	s, Inc		
	office address: 3024 NW 72 A			
z. mo p.mo.p.			-	
3. The mailing	address (if different):			
4. Date of inco	poration/qualification: 01/27/20	03Document number: P0300	0012466	
	d street address of the current registrement of State: (If resigned, enter	stered agent and registered office on file v resigned)	vith the	
	Carmen Higuera		_	
	3024 NW 72 Avenue		_	
	Miami, FL 33122		. s .	3
6. The name an (if changed):	d street address of the new register	red agent (if changed) and /or registered o	SECKE IÁK Tallaha	
	Rene Kuiper		_ · · ·	~~~
	3024 NW 72 Avenue		SEE PAR	
	P.O.: Miami, FL 33122	Box NOT acceptable	2: 0	
			- m -	ļ
The street addr as changed wil	ess of its registered office and the be identical	e street address of the business office of i	ts registered ag	gent,
Such change wauthorized by t	as authorized by resolution duly a he board, or the corporation has b	ndopted by its board of directors or by an seen notified in writing of the change.	officer so	
	1/12mp	Rene Kuiper, PD		
	are of an opinger or director	Printed or typed name and to	ile	_
I further agree performance of agent. Or, if th hercby confirm	to comply with the provisions of a mediaties, find I am familiar with it document it being filed merely that the obygoration has been no	gent and agree to act in this capacity, all statutes relative to the proper and con h and accept the obligation of my positio to reflect a change in the registered officified in writing of this change.	nplete n as registered ce address, 1	ı
	matury of Registered Agent	Date		_
If signing on bl	half of an entity:			
	yped or Printed Name	-		

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