P03000073049

| (Re | equestor's Name) | | | |
|---|-------------------|-----------|--|--|
| (Address) | | | | |
| (Ad | dress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | WAIT | MAIL | | |
| (Bu | siness Entity Nan | ne) | | |
| (Document Number) | | | | |
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BY DEC 28 AMII: 95
SECRETARY OF STATE
ALLARASSEE TO STATE

T. Roberts JAN 0 3 2007

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|---|--|---|--|--|
| SUBJECT: Beatriz A. Llorente, P.A. (Name of Corporation) | | | | |
| росим | ENT NUMBER: P03000073049 | | | |
| 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: | | | | |
| r rease ret | an an correspondence concerning this matter to t | ne fonowing. | | |
| | Beatriz A. Llorente | | | |
| (Name of Contact Person) | | | | |
| | | | | |
| | Beatriz A. Llorente, P.A. (Firm/Compa | anv) | | |
| | (i iiii/ Compe | , | | |
| | 12925 S.W. 132 Street, Unit 4 Build | ding 7 | | |
| | (Address) |) | | |
| | Miami El 22426 | | | |
| | Miami, FL 33186 (City/State and Zi | p Code) | | |
| For further | r information concerning this matter, please call: | , | | |
| Beatriz A. | . Llorente | (Area Code & Daytime Telephone Number) | | |
| | (Name of Contact Person) | (Area Code & Daytime Telephone Number) | | |
| Enclosed i | is a \$35.00 check made payable to the Departmen | t of State. | | |
| | Mailing Address: Amendment Section | Street Address: Amendment Section | | |
| | Division of Corporations | Division of Corporations | | |
| | P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle | | |
| | 1 ananassee, 1 L 32314 | Tallahassee, FL 32301 | | |

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

| statement of cha | ange is submitted for a corporation o | 7.0302, 607.1308, or 617.1308, Florida Statutes, this organized under the laws of the State ofeegistered agent, or both, in the State of Florida. | | |
|--|---|---|--|--|
| 1. The name of | the corporation: Beatriz A. Llorente, | P.A. | | |
| 2. The principal office address: 12925 S.W. 132 Street, Unit 4 Building 7, Miami, FL 33186 | | | | |
| 3. The mailing a | address (if different): PO BOX 5605 | 66 Miami, FL 33256 | | |
| 4. Date of incor | poration/qualification: 07-02-03 | Document number: P03000073049 | | |
| | d street address of the current registe rtment of State: | red agent and registered office on file with the | | |
| | Beatriz A. Llorente | | | |
| | 9830 SW 77th Avenue, Sui | te 155 | | |
| | Miami, FL 33156 | | | |
| 6. The name and (if changed): | d street address of the new registered | agent (if changed) and /or registered office | | |
| | Beatriz A. Llorente | | | |
| | 12925 S.W. 132 Street, Uni | | | |
| | (P.O Box NOT acce | ptable) | | |
| The street address changed will | ess of its registered office and the st be identical. | treet address of the business office of its registered agent, | | |
| Such change wa authorized by th | as authorized by resolution duly adhe board, or the corporation has bee | opted by its board of directors or by an officer so en notified in writing of the change. | | |
| 1/1/4 | ure of an officer or director) | Beatriz A. Llorente | | |
| I hereby accept I further agree to of my duties, an document is bei | · · | (Printed or typed name and title) Int and agree to act in this capacity. It statutes relative to the proper and complete performance It obligation of my position as registered agent. Or, if this In the registered office address, I hereby confirm that the Innge. | | |
| 17 | 6 | 12/24/2007 | | |
| | gnature of Registered Agent) | (Date) | | |
| It signing on be | chalf of an entity: | | | |
| | Typed or Printed Name) | | | |

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