P03000108568

PAU & ASSOCIATES INC. 2783 SW 33 AVE MIRMI FC. 33133

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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Pursuant to the p	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this states	nent of
change is submit	itted for a corporation organized under the laws of the State of FLORIDA	in order
to change its reg	gistered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: PAV + ASSOCIATES, INC.	
2. The principal	office address: 2 185 SW 33 RD AVE	
	MIANI FL 33133	
3. The mailing a	m $IAmI$, FL 33133 address (if different): $(SAmE)$	
4. Date of incorp	poration/qualification: 09/21/03 Document number: P0300010856	8
	d street address of the current registered agent and registered office on file with the rtment of State:	
	ALFONSU LUIS-ABREU	= -11
	ALFONSU LUIS-ABREU 2783 SW 337 AVE 2783 SW 337 AVE	3
	· · · · · · · · · · · · · · · · · · ·	SI HO
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	50 izi
	PAUL A. DIRKS	
	37 MA JORCA AVE. #403 (P.O. Box or personal mailbox NOT acceptable)	
	(P.O. Box or personal mailbox NOT acceptable)	
	CORAL GABLES, FL 33134	
The street addre changed will be	ess of its registered office and the street address of the business office of its registered agent e identical.	, as
Such change wa the board, or the	as authorized by resolution duly adopted by its board of directors or by an officer so authorice corporation has been notified in writing of the change.	zed by
	Signature of an object of cultrector) ACFONSO LVIS-AB (Printed or Vised name and title)	REO.
I hereby accept I further agree t duties, and I am being filed mere been notified in	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance a familiar with and accept the obligation of my position as registered agent. Or, if this docu- ely to reflect a change in the registered office address, I hereby confirm that the corporation writing of this change.	re of my iment is i has
	1 aut 107/04	
·	(Date)	
	chalf of an entity:	
_ PA	TUL A. DIRKS ADMINISTRATION	•
	(Typed or Printed Name) (Capacity)	

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