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COVER LETTER

TO: Amendment : Division of C	Section Corporations	*				
SUBJECT: Borroto Architect Professional Association Name of Corporation						
DOCUMENT NUM	BER: P030	000116523				
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:						
	Marilyn	Borroto				
	Name of Cor	ntact Person				
_	Borroto Arc					
	Firm/Co	ompany				
	400 O	Invested Ocides 400				
_	180 Crandon Bou		_			
	Addi	C33				
	Van Bianana	Florido 20440				
_	Key Biscayne, City/State an	HONGA 33149 Id Zip Code	_			
	•	•				
	borroto@					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
M	arilyn Borroto	at (305) 3	361-1161			
	of Contact Person	at (305)3 Area Code & Daytime To	elephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section	Street Address: Amendment Section	•			
	Division of Corporations	Division of Corpora				
	P.O. Box 6327	Clifton Building	********			
	Tallahassee, FL 32314	2661 Executive Cer	nter Circle			
		Tallahassee, FL 323	301			

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

statement of ch	ange is submitted for a c	orporation organized	07.1508, or 617.1508, Flo l under the laws of the Stat l agent, or both, in the Stat	e of Florida
	0 0		ofessional Associa	•
	l office address: 180 C			
	ayne, Florida 33149		•	
	address (if different): SE	nme as above		4-11-11-11-11-11-11-11-11-11-11-11-11-11
4. Date of incom	rporation/qualification:	10/15/2003	Document number:	P03000116523
	d street address of the cu artment of State: (If resig		t and registered office on fi	ile with the
	Wilfredo Borroto			
	200 Crandon Bou	levard, Suite 201		
	Key Biscayne, Flo	orida 33149		一
6. The name an (if changed):		ew registered agent (i	f changed) and /or registere	ZIBB NOV 12 PH. 4: 00 SECRETARY OF STATE S
	Wilfredo Borroto			SEE 3
	180 Crandon Bou	levard, Suite 103	,	
		P.O. Box NOT acc	eptable	REFE
	Key Biscayne, Flo	rida 33149		
The street addr as changed wil	ress of its registered offi	ice and the street add	lress of the business office	e of its registered agent,
Such change wanthorized by	vas auth rized by resoluthe bodyn, or the corpora	tion duly adopted by ation has been notifi	its board of directors or ed in writing of the chang	by an officer so e.
Vionat	And an officer or director		Wilfredo Borro Printed or typed nam	to, Director
I hereby accept further agree of my duties, a document is be corporation ha		gistered agent and a visions of all statute: nd accept the obliga ect a change in the re ng of this change.	gree to act in this capacits s relative to the proper an tion of my position as reg egistered office address, I	
			11/09/	09
Si	gnature Registered Agent		Date	
If signing on b	enall of an entity:			
	Wilfredo Borroto Typed or Printed Name			
	Appearance remove reason			

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