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COVER LETTER

Division of Corporations
SUBJECT: Aces United Of Jocksonville. Name of Corporation
DOCUMENT NUMBER: 61-1436768.
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:
Gustavo Ramirez Name of Contact Person
Name of Contact Person
Aces United of Jacksonville Firm/Company
7616 NW 114 Path Address
Doral, FL 33178. City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gustevo Rumirez at 904 699-3438 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

26 W 4.55

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

statement of change is submitted for a corporation organized under the laws of the State of Florical in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Aces United of Jacksonville ACC
2. The principal office address: 7616 NW 114 Path Doral, Fl 3317
3. The mailing address (if different): Same as principal address.
4. Date of incorporation/qualification: Agrat 7 2004 Document number: 61-1436268 -
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)
2925 P. edmontimanor Dr
Orange Park, Fl 32065
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
7616 NW 114 Path Doral, FL 33178
Doral, FL 33178 P.O. Box NOT acceptable
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 comporation has been notified in writing of the change.
Gustavo Ramirez
Signature of an officer or director Printed or typed name and title Thereby accept the appointment as registered agent and agree to act in this canacity
Thereby 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.
2-26-2010 Date
Signature of Augusta Augusta
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (8/05)