

P04000040680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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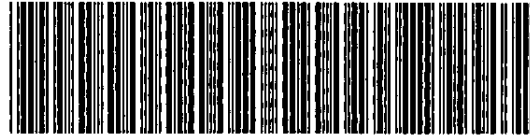
(Business Entity Name)

(Document Number)

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05/24/13--01004--022 **10.00

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FILED

13 MAY 23 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RO Change
05-28-13

DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2013

ADRIANO RIBEIRO
GRUPO DELPA CORP
1435 NW 78TH AVE., #101
DORAL, FL 33126

SUBJECT: GRUPO DELPA CORP
Ref. Number: P04000040680

We have received your document for GRUPO DELPA CORP and check(s) totaling \$25.00. However, your check(s) and document are being returned for the following:

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 213A00008351

RECEIVED
13 MAY 23 PM 1:12
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **GRUPO DELPA CORP**

Name of Corporation

DOCUMENT NUMBER: **P04000040680**

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:

ADRIANO RIBEIRO

Name of Contact Person

GRUPO DELPA CORP

Firm/Company

1325 NW 78 AVE, SUIT 101

Address

DORAL, FL 33126

City/State and Zip Code

adriano@delpaintl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADRIANO RIBEIRO

Name of Contact Person

at (**305**) **599-3977**

Area Code & Daytime Telephone Number

Enclosed 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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GRUPO DELPA CORP
2. The principal office address: 1325 NW 78 AVE SUITE 101
DORAL, FL 33126
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/04/2004 Document number: P04000040680
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)

DANIEL URRRA

3403 NW 82 AVE SUITE 330

DORAL, FL 33122

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DANIEL URRRA

1325 NW 78 AVE SUITE 101

P.O. Box NOT acceptable

DORAL, FL 33126

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 MAY 23 AM 1:42

FILED

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 corporation has been notified in writing of the change.



Signature of an officer or director

DANIEL URRRA

Printed or typed name and title

I hereby 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.

Signature of Registered Agent

MAY-20-2013

Date

If signing on behalf of an entity:

Typed or Printed Name

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