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R. WHITE

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## REGISTERED AGENT CHANGE DEMIR GROUP INTERNATIONAL, INC.

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August 27, 2018

## FLORIDA DEPARTMENT OF STATE

Division of Corporations

DEMIR GROUP INTERNATIONAL, INC. 420 LINCOLN ROAD SUITE 222 MIAMI BEACH, FL 33139US

SUBJECT: DEMIR GROUP INTERNATIONAL, INC.

REF: P04000085442

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## FAX AUDIT NO. H18000248784 3

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, inge is submitted for a comporation organized under th	e laws of the State of Florida		-
	r to change its registered office or registered agent, or	-		
	the corporation: DEMIR GROUP INTERNAT			_
2. The principal	office address: 10800 BISCAYNE BLVD. SI	UITE 200		
	MiAMI, FL 33161	<del></del>		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 06/01/2004 Docum	ent number: P04000085	442	
5. The name are Florida Depar	istreet address of the current registered agent and regi-	stered office on file with the	ຫ	~_
Avila Rodriguez Hernandez Mena & Ferri LLP		erri LLP	ĭ ECF	8 6
2525 Ponce de Leon Blvd. PH 1225				AUG 2
Coral Gables, FL 33134				27
6. The name and street address of the new registered agent (If changed) and /or registered office (if changed):  INTERAMERICAN CORPORATE SERVICES LLC			OF STATE	AM 6: 00
2525 Ponce de Leon Blvd. Suite1225				
PO Box NOT occessable				
Coral Gables, FL 33134				
The street address changed will	ess of its registered office and the street address of the	e business office of its regist	ered age	n <b>t</b> ,
Such change we authorized by the	as authorized by resolution duly adopted by its board are for the corporation has been notified in writing	of directors or by an officer ng of the change.	SQ	
Haygo Demirian, President				
/ 47/2	the appointment as revistered agent and agree to ac to comply with the provisions of all statutes relative i my duties, and I am familiar with and accept the obl is document is being filed merely to reflect a change that the corporation has been notified in writing of the	Printed or typed rume and tide  1 in this capacity, to the proper and complete igation of my position as reg in the registered office addr his change.	istered ess, I	,
		8/27/18		
Sig	nuture of Regardered Agent	Date		•
If signing on be	half of an entity:			
Asnardo Ga				
ì	yped or Printed Name			
	* * * FILING FEE: \$35.00 * *	<del>* *</del>		

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