

P05000000214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

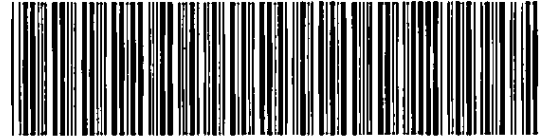
(Business Entity Name)

(Document Number)

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FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C.

JUL 2 2015

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Adrian Management, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P05000002114

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:

**Maria J. Cervantes**

Name of Contact Person

**SMGQ LAW**

Firm/Company

**201 Alhambra Circle, Suite 1205**

Address

**Coral Gables, FL 33134**

City/State and Zip Code

**mcervantes@smgqlaw.com**

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

For further information concerning this matter, please call:

**Roland Sanchez-Medina** at **(305) 377-1000**  
Name of Contact Person 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: Adrian Management, Inc.
2. The principal office address: 13687 SW 26 St.  
Miami, FL 33175
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/05/2005 Document number: P05000002114

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)

Olga Adrian

13687 SW 26 St.

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

Registered Corporate Services, LLC

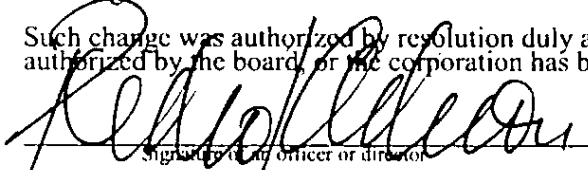
201 Alhambra Circle, Suite 1205

P.O. Box NOT acceptable

Coral Gables, FL 33134

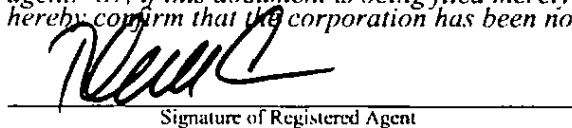
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Pedro Adrian President  
\_\_\_\_\_  
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

7/2/2019  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Adrian Homes Corp.  
Name of Corporation

**DOCUMENT NUMBER:** K21093

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:

**Maria J. Cervantes**

Name of Contact Person

**SMGQ LAW**

Firm/Company

**201 Alhambra Circle, Suite 1205**

Address

**Coral Gables, FL 33134**

City/State and Zip Code

**mcervantes@smgqlaw.com**

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

For further information concerning this matter, please call:

**Roland Sanchez-Medina** at ( **305** ) **377-1000**  
Name of Contact Person 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

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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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Adrian Homes Corp.
2. The principal office address: 13687 SW 26 St.  
Miami, FL 33175
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 4/12/88 Document number: K21093

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)

Olga Adrian

13687 SW 26 St.

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

Registered Corporate Services

201 Alhambra Circle, Suite 1205

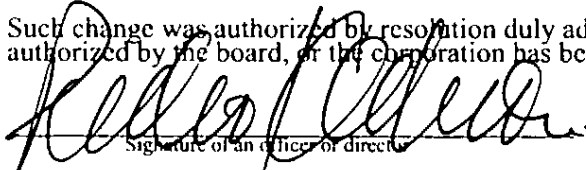
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Coral Gables, FL 33134

FILED  
2019 JUL 15 PM 4:38  
TALLAHASSEE, FLORIDA

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

Pedro Adrian M  
\_\_\_\_\_  
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

7/2/2019  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Adrian Management, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P05000002114

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Name of Contact Person

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2. The principal office address: 13687 SW 26 St.  
Miami, FL 33175  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 4/16/2013 Document number: P05000002114

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)

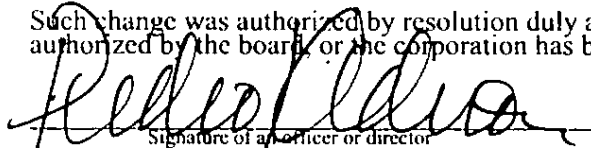
Olga Adrian  
13687 SW 26 St.

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

Registered Corporate Services LLC  
201 Alhambra Circle, Suite 1205  
P.O. Box NOT acceptable  
Coral Gables, FL 33134

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

Pedro Adrian Pres  
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

7/2/2019  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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