

POS000045409

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Goibert Corp.  
(Name of Corporation)

**DOCUMENT NUMBER:** P 05000045409

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:

ANA MARIA CAMACHO, ESQ.  
(Name of Contact Person)

CONTRERAS JONASZ CAMACHO, P.A.  
(Firm/Company)

141 ALMERIA AVENUE  
(Address)

CORAL GABLES FL. 33134  
(City/State and Zip Code)

For further information concerning this matter, please call:

ANA M. CAMACHO, ESQ. at (786) 594-0180  
(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

