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TO:

Amendment Section Division of Corporations

SUBJECT: NW Miami Real Estate, Inc. P06000021854

DOCUMENT NUMBER:

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:

Lodoiska Garcia

Name of Contact Person

NW Miami Real Estate, Inc.

Firm/Company

12171 SW 268 Street

Address

Homestead, FL 33032

City/State and Zip Code

lgarcia@americancare.net

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

For further information concerning this matter, please call:

Lodoiska Garcia

Name of Contact Person

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: NW Miami Real Estate, Inc.
2. The principal	office address: 12171 SW 268 Street Homestead, FL 33032
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 2/14/2006 Document number: P06000021854
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Mark Romance
	396 Alhambra Circle North Tower, 14th Floor
	Miami FI 33134
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Lodoiska Garcia 12171 SW 268 Street
	12171 SW 268 Street
	P.O Box NOT acceptable Homestead, FL 33032
The street addre	ess of its registered office and the street address of the business office of its registered agent,
ī /	
authorized by il	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	re of an officer of director with the Charles of th
- I furNièv narée i	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered to document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sh	nature of Registered Agent Date
If signing on be	half of an entity:
	WISK GARUA Appel or Printed Name

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