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TALLAHASSEE, FLORIDA

COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: Financial Group of Miami Inc (Name of Corporation)
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:
Liany L. Ortiz (Name of Contact Person)
(Name of Contact Person)
Financial Group of Miami, Inc
11401 Sw 40th STreet Ste 3/1 (Address)
Miami, FL 33/65 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 785-4917 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: financial Group of Hiami Inc
2. The principal office address: 1/401 Sw 40th ST 37E 311
Hiami FL 33165
3. The mailing address (if different): (Same)
4. Date of incorporation/qualification: 02/27/2007 Document number: P06000029815
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Linny L. Ollis
7175 SW B ET SE 203
Miami, FL 33144
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LIANY L. DATE
11461 Sw 40 15 ST STE 311 70 50 C
Miami, A 33165
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 or director) Liany L. Ortiz Aresident (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) (Signature of Registered Agent) (Date)
(Signatur of Registered Agent) (Date)
If signing on behalf of an entity:
Liany L. DAiz (Ryped or Printed Name)
(4 yped of 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
CR2E045 (8/05)