## P06000050686

(Re	equestor's Name)	
(Ac	ldress)	
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Special Instructions to Filing Officer:		
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## **COVER LETTER**

Division of Corporations
SUBJECT: LCOA Enterforises Inc. (Name of Corporation)
DOCUMENT NUMBER: PO6000050686
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:
Liset Conzalez (Name of Contact Person)
- Disp
7891 U). Flagler St. # 320 (Address)
Miami Fl. 33144  (City/State and Zip Code)
For further information concerning this matter, please call:
Lifet Corralez at (786) 700 6824  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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 satement 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: LOA Enterprises Inc.
2. The principal office address: 7891 W Flagler St # 320
Miami Fl. 83144
3. The mailing address (if different):
4. Date of incorporation/qualification: Alori 7, 2006 Document number: Pologogo 50 686
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Coset Conzalez
351 NW 87 QUE # 1117
Hiami Fl 33126
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
<u>Liset</u> Gonzalez
7891 W Flagler St # 320 (P.O. Box NOT acceptable)
Mami Fl 33144
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)  Light 60 mra let / Director  (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)  Ob-19-07  (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

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