(Re	equestor's Name)	
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COVER LETTER

Division of Corporations			
SUBJECT: Miramar Real Properties, Inc. Name of Corporation			
Name of Corporation			
DOCUMENT NUMBER: P0700000662			
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			
Miramar Real Properties, Inc.			
Firm/Company			
12171 SW 268 Street			
Address			
Homestead, FL 33032			
City/State and Zip Code			
Igarcia@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 Area Code & Daytime Telephone Number			
Name of Contact Person at (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 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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: Miramar Real Properties, Inc.
2. The principal office address: 12171 SW 268 Street Homestead, FL 33032
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/2/2007 Document number: P0700000662
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)
Mark Romance
396 Alhambra Circle North Tower, 14th Floor
Miami, FL 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lodoiska Garcia
12171 SW 268 Street
P.O. Box NOT acceptable Homestead, FL 33032
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 Mollicer or prector Manual Mollicer or prector 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 Date
If signing on behalf of an entity:

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

Typed or Printed Name