

P070000024970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

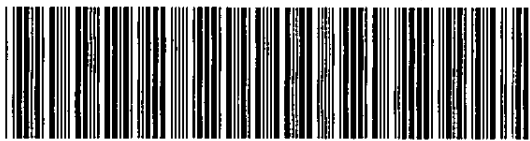
(Business Entity Name)

(Document Number)

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Change

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

MR  
11/11/08

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VILLAS SAT CORP. (Name of Corporation) +

**DOCUMENT NUMBER:** P-07000024970

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:

MICHEL VILLANUEVA  
(Name of Contact Person)

VILLAS SAT CORP.  
(Firm/Company)

8918 WEST FLAGLER STREET, UNIT #6  
(Address)

MIAMI, FL 33174  
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHEL VILLANUEVA at ( 305 ) 492-2729  
(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 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: VILLAS SAT CORP.
2. The principal office address: 8918 WEST FLAGLER STREET, UNIT #6  
MIAMI, FL 33174
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 02/23/2007 Document number: P-07000024970

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)

LUIS VILLANUEVA (RESIGNED)  
19917 NW 85 AVENUE  
MIAMI GARDENS, FL 33015

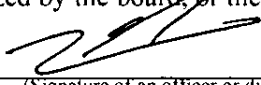
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MICHEL VILLANUEVA  
8918 WEST FLAGLER STREET, UNIT #6  
(P.O. Box NOT acceptable)  
MIAMI, FL 33174

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

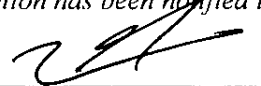
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, of the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
(Signature of an officer or director)

LUIS VILLANUEVA  
\_\_\_\_\_  
(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)

11/05/2008  
\_\_\_\_\_  
(Date)

If signing on behalf of an entity:

N/A  
\_\_\_\_\_  
(Typed or Printed Name)

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