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## **COVER LETTER**

TO: Amendment Section Division of Corporations	•			
SUBJECT: GIOGIO, INC.  (Name of Corporation)	on)			
DOCUMENT NUMBER: P07000085032				
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the f	ollowing:			
ANTONIO L. ROCA, ESQ.  (Name of Contact Per	rson)			
ROCA GONZALEZ P.A. (Firm/Company)	, and the second			
2601 S. BYSHORE DRIVE, STE 600 (Address)				
MIAMI, FL 33133				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
ANTONIO ROCA - at (3) (Name of Contact Person)	805 859-6050 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes inge is submitted for a corporation organized under the laws of the State of FLORI or to change its registered office or registered agent, or both, in the State of Florida.	DA		
1. The name of t	the corporation: GIOGIO, INC.			
2. The principal	office address: 2601 S. BAYSHORE DRIVE, STE 600, MIAMI, FL 33133			
3. The mailing a	address (if different):		,	
4. Date of incorp	poration/qualification: 7/26/2007 Document number: P07000085032	<u> </u>		
	d street address of the current registered agent and registered office on file with the trment of State:			
	MIGUEL FARRA	<b>5</b>		
	1001 BRICKELL BAY DRIVE, 9TH FL	LL A	30.4	
	MIAMI, FL 33133	HASS	C =	7
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	Y OF STA	DEC 14 PH 2: 45	Fec
	RGPA REGISTERED AGENT CORP.	P P	វិភ	
	2601 S. BAYSHORE DRIVE, STE 600			
	(PO. Box NOT acceptable)  MIAMI, FL 33133			
The street addre	ess of its registered office and the street address of the business office of its regis be identical.	tered ag	gent,	
Such change was	as authorized by resolution duly adopted by its board of directors or by an office ne board, or the corporation has been notified in writing of the change.	r so		
OU Signati	Maria Solc Givlitare of an officer or director)  Maria Solc Givlitare of an officer or director)	INf		
I further agree i of my duties, an document is bei	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 p ad I am familiar with and accept the obligation of my position as registered agen ing filed merely to reflect a change in the registered office address, I hereby conj s been notified in writing of this change.	perform t. Or i firm tha	ance f this t the	
W Si	mature of Registered Agent) 12 11 2007			
If signing on be	half of an entity:			
	distered Agent COVP.			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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