## P07000-114156

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

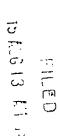
18

Office Use Only



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08/18/15--01006--014 \*\*85.00





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

(i)

SUBJECT: Rubio Construction Consulting Inc

Name of Corporation

P07000114156

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:

Franklyn Rubio

Name of Contact Person

Rubio Construction Consulting Inc

Firm/Company

950 Brickell Bay Drive, Apt 1400

Address

Miami, FL 33131

City/State and Zip Code

frubio@rubioconstruction.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Franklyn Rubio

.,305

609-2806

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

| statement of chan                      | rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.  |
|--|--|
| 1 The name of th                       | e corporation: Rubio Construction Consulting Inc   |
|  | office address: 201 S Biscayne Blvd, suite 2800, Miami, FL 33131   |
| 2. The principal o                     | Thee address.  |
| 3. The mailing ad-                     | dress (if different):  |
| 4. Date of incorpo                     | pration/qualification: 10/17/2007 Document number: P07000114156  |
| 5. The name and s                      | street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)   |
| <u> </u>                               | Franklyn Rubio   |
| _                                      | 41 SE 5 ST, apt 1503   |
| _<br>!<br>                             | Miami, FL 33131  Street address of the new registered agent (if changed) and /or registered office   |
| 6. The name and s (if changed):        | street address of the new registered agent (if changed) and /or registered office  |
| <u> </u>                               | Franklyn Rubio   |
| Ş                                      | 950 Brickell Bay Drive, Apt 1400   |
| 1                                      | PO Box NOT acceptable  Miami, FL 33131   |
| The street address as changed will b   | s of its registered office and the street address of the business office of its registered agent, be identical.  |
| Such change was authorized by the      | authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.  |
| Signature                              | of an officer or director  Frank Mr. RVIIV PRESIDENT  Printed or typed name and title  |
| I førther agree to<br>performance of m | he appointment as registered agent and agree to act in this capacity.<br>I comply with the provisions of all statutes relative to the proper and complete<br>By duties, and I am familiar with and accept the obligation of my position as registered<br>I document is being filed merely to reflect a change in the registered office address, I<br>by the corporation has been notified in writing of this change. |
|  | 8/7/15   |
| Signa                                  | ture of Registered Agent Date  |
| /ÎPsigning on beha                     | alf of an entity:  |
| Tun                                    | ed or Printed Name   |
| 137                                    | or a finish frame  |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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