

PO 7000123724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

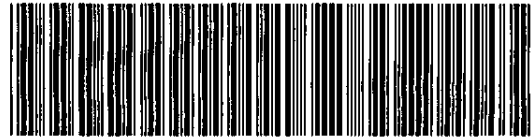
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Old Interamerican Hialeah Center closed corp
Name of Corporation

DOCUMENT NUMBER: P 07 000 123 724

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:

JOEL LAGO
Name of Contact Person

Old Interamerican Hialeah Center closed, corp
Firm/Company

9425 Sunset Drive #211
Address

Miami FL 33174
City/State and Zip Code

JLAGOBOX @ GMAIL . com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOEL LAGO at (305) 305-1718
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: old interamerican thalukah center closed, corp.
2. The principal office address: 9425 SUNSET DRIVE #211 Miami 33133

3. The mailing address (if different): 8004 NW 154 ST #208
Miami Lakes FL 33016

4. Date of incorporation/qualification: 11/14/07 Document number: P07000123724

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)

JOEL LAGO.
9425 Sunset Drive # 211
Miami FL 33133

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

New: 8004 NW 154 ST #208
Miami Lakes FL 33016

P.O. Box NOT acceptable

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]
Signature of an officer or director

JOEL LAGO, P.
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]
Signature of Registered Agent

12/21/2010
Date

If signing on behalf of an entity:

JOEL LAGO
Typed or Printed Name

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