PORMO 1005

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SECRETARY OF STATE TALLASY SSEELTI ORIDA

FEB 1 1 2014 **T. CARTER**

COVER LETTER

TO:	Amendment Section Division of Corporations						
	900 SOUTH BISCAYNE RETAIL IN	NC.					
SUBJ	ECT: Name of C	Corporation					
	P08000001005	•					
DOC	UMENT NUMBER:						
The en	nclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.					
Please	return all correspondence concerning this matter	er to the following:					
	JOSE F P	PENA					
	Name of Co	entact Person					
	900 SOUTH BISCAYNE RET	TAIL INC.					
	Firm/Company						
	1395 BRICKEL	L AVE #3301					
	Add	lress					
	MIAMI, FL	L 33131					
	City/State and Zip Code						
	jfpena900@gmail.com						
	E-mail address: (to be used for future annual report notification)						
_							
	orther information concerning this matter, please						
JOS	E F PENA	305 321-9865 at ()					
	Name of Contact Person	Area Code & Daytime Telephone Number					
Enclo	sed is a \$35.00 check made payable to the Depar	rtment of State.					
	Mailing Address:	Street Address:					
	Amendment Section Division of Corporations	Amendment Section Division of Corporations					
	P.O. Box 6327	Clifton Building					
	Tallahassee, FL 32314	2661 Executive Center Circle					
		Tallahassee, FL 32301					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the p	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statut nge is submitted for a corporation organized under the laws of the State of $\overline{\sf FLO}$	es this RIDA	
in order	r to change its registered office or registered agent, or both, in the State of Florid	a.	
 The name of t The principal 	900 SOUTH BISCAYNE RETAIL INC. he corporation: 900 BISCAYNE BLVD #105 MIAMI FL 33132 office address:		
	SAME AS ABOVE		
3. The mailing a	ddress (if different):		
4. Date of incorp	incorporation/qualification:Document number:		
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	•	
	PRIVE CONSULTING GROUP LLC		
	900 BISCAYNE BLVD #105		
	MIAMI, FL 33132	14 FI	SEC
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	FEB-4	
	JOSE F PENA	7	390
	900 BISCAYNE BLVD # 105	9: 02	S TATE
	P.O. Box NOT acceptable MIAMI, FL 33132		`> ''
The street addre	ss of its registered office and the street address of the business office of its registered.	stered	agent,
_	s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.		
	ANTONIO MAGRANER		
	re of an officer or director Printed or typed name and title		
I further agree t	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 my duties, and I am familiar with and accept the obligation of my position as re is document is being filed merely to reflect a change in the registered office add that the corporation has been notified in writing of this change.	egistere Iress, I	ed
	12/26/13		
Sign	pattine of Registered Agent Date		 -
If signing on bel	half of an entity:		
Ту	/ped or Printed Name		

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

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314