P08000019066

| (Re | questor'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: | | | |
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Office Use Only



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06/25/08--01016--002 **35.00

Mewis 6-26-08



COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: E.C. COMPUTER, CORPORATION | on . |
|---|---|
| (Name of Cor | rporation) |
| DOCUMENT NUMBER: P08000019066 | |
| The enclosed Statement of Change of Registered Office/ | Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter t | to the following: |
| EDGAR CUAE | |
| (Name of Cont | act Person) |
| E.C. COMPUTER, CO | |
| (Firm/Con | npany) |
| 8653 S.W. 154 CII | |
| (Addre | ess) |
| MIAMI, FLORID | |
| (City/State and | • |
| For further information concerning this matter, please ca | il: |
| EDGAR CUADRA JR. | at (786) 200-5054 (Area Code & Daytime Telephone Number) |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a \$35.00 check made payable to the Departn | nent of State. |
| Mailing Address: Amendment Section | Street Address: Amendment Section |
| Division of Corporations P.O. Box 6327 | Division of Corporations 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

| statement of chang | • | 607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of Florida. | |
|---------------------------------------|--|--|--|
| 1. The name of the | e corporation; E.C. COMPUTER, CORPO | DRATION | |
| | ffice address: 15347 S.W. 55 TERRA | MIAMI, FLORIDA 33185 | |
| 3. The mailing add | dress (if different): | | |
| 4. Date of incorpo | oration/qualification: 2/21/2008 | Document number: P08000019066 | |
| 5. The name and s Florida Departr | street address of the current registered age nent of State: | nt and registered office on file with the | |
| _ | EDGAR CUAD | RA JR. | |
| _ | 15347 S.W. 55 TERRA | | |
| - | MIAMI, FLORIC | | |
| 6. The name and s (if changed): | street address of the new registered agent | (if changed) and /or registered office | |
| _ | EDGAR CUA | | |
| _ | 8653 S.W. 154 C | IRCLE PLACE | |
| , | (P.O. Box NOT acceptable) MIAMI, FLORIDA 33193 | | |
| - | | | |
| The street address as changed will be | s of its registered office and the street accept de identical. | ddress of the business office of its registered agent, | |
| Such change was authorized by the | authorized by resolution duly adopted bland, or the corporation has been not | by its board of directors or by an officer so fied in writing of the change. | |
| gry | | EDGAR CUADRA JR PRESIDENT | |
| / / / / | to t an officer of director) he appointment as registered agent and be comply with the provisions of all status I am familiar with and accept the oblig g filed merely to reflect a change in the been notified in writing of this change. | (Printed or typed name and title) agree to act in this capacity. tes relative to the proper and complete performance testion of my position as registered agent. Or, if this registered office address, I hereby confirm that the | |
| (Sign | nature of Registered Agent) | (Date) | |
| If signing on beh | alf of an entity: | | |
| (Tv | rped or Printed Name) | | |

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