P08000063137

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	,	

Office Use Only



100235549251

Change

06/01/12--01005--020 **35.00



BOR 6/4/12

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Parada Holdings Corporation		
DOCUMENT NUMBER: 103000 03137		
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:		
Parada Holdings Corp. Firm/Company		
2500 Ponce De leun Blud		
Coval Gastes (1 33134) City/State and Zip Code		
Conturion @ for fin (estaurant: wan E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Carlos Centurion at 305, 798-3002 Name of Contact Person Area Code & Daytime Telephone Number		
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 Florida Library in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Paradu Holdings Corporation
2. The principal office address: 2500 Ponce De Won Blvd.
Coval Gasus, M 33134
3. The mailing address (if different):
4. Date of incorporation/qualification: 4 30 2002 Document number: PD 8 0000 6 3 13
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)
Murai Wald Brondo a Moreno PA.
1200 Ponce De leon Blud.
_ Coval Gasles, A 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed): (if changed): (if changed):
2500 Ponce De Con B) VOI.
_ Cival Gasles, 1 33134
The street address of its registered of ite 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 of an officer of Director / 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 profisions of all statutes relative to the proper and complete performance of my dylies, 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 of Registered Agent S 30 12 Date
If signing on behalf of an entity: ON US ON WION Transfer Printed Name
Typed or Printed Name

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