## PUBOCOC 64595

	(equestor's Name)				
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	nd				
(A	ddress)				
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(E	dusiness Entity Name)				
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to	o Filing Officer:				
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2020 JUI: 14 PH 5: 55

## COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: TAM REALTY CORP Name of Corporation  DOCUMENT NUMBER: P08000064595  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:
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:
Teresa Kupp
Name of Contact Person
TAM REALTY CORP
Firm/Company
5555 COLLINS AVENUE UNIT 17C
Address
MIAMI BEACH/FLORIDA 33140
City/State and Zip Code
teasplay@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Teresa Rupp  at (305 )303-5510  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 Compositions  Street Address: Amendment Section
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corpo	1502, 617.0502, 607.1508, or 617.1 Pration organized under the laws of Tice or registered agent, or both, in	of the State of Florida	this
	the corporation: TAM REAL		Ž	
2. The principal	office address: 5555 Collins	Avenue, Miami Beach Florida Unit	17C 33140	
3. The mailing a	address (if different): Same			
	poration/qualification: 1981		iber: P0800064595	
5. The name and		nt registered agent and registered of	ffice on file with the	
	Teresa Rupp			2
	3531 SW 94th Avenue			2020 JUL 14
	Miami Florida 33165			11
6. The name and (if changed):	d street address of the new re	egistered agent (if changed) and /o	r registered office	PH 5:
	Teresa Rupp			25
	5555 Collins Avenue Unit 1	7C		
		P.O. Box NOT acceptable		
	Miami Beach, Florida 33140	)		
The street address changed will	ess of its registered office a be identical.	and the street address of the busine	ess office of its registe	ered agent,
Such change wathorized by the	as authorized by resolution he board, or the corporation	duly adopted by its board of dire has been notified in writing of the	ctors or by an officer he change.	so
Dem	Riesso	Teresa Rupp	P	
L.	re of an officer of director		r typed name and title	
I hereby accept I further agree of my duties, ar document is be corporation ha.	the appointment as registe to comply with the provision of am familiar with and a ing filed merely to reflect as been notified in writing of	ered agent and agree to act in this ons of all statutes relative to the peccept the obligation of my position change in the registered office act this change.	capacity, roper and complete p n as registered agent, ddress, I hereby confi	erformance Or, if this rm that the
_Ou	ta (Language Agent	Teresa Rupp	7/7/2000 Date	シ
If signing on be	chalf of an entity:			
Т	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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