

P08000098097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

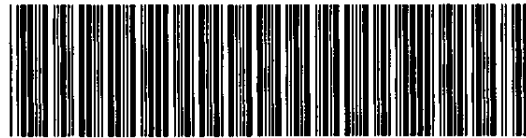
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200235562262

05/29/12--01056--010 **35.00

FILED
12 JUN 11 PM 3:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

JUN 12 2012

C. MUSTAIN

Emen

COVER LETTER

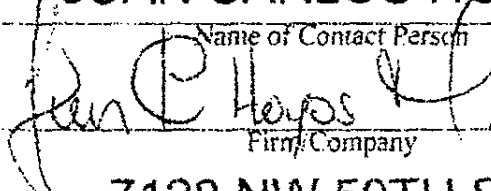
TO: Amendment Section
Division of Corporations

SUBJECT: **FIGURAS PERFECTAS CORP**
Name of Corporation

DOCUMENT NUMBER: **P08000098097**

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:

JUAN CARLOS HOYOS
Name of Contact Person

Firm/Company
7128 NW 50TH ST
Address
MIAMI, FLORIDA, 33166
City/State and Zip Code
juanhoyos@dianeandgeordi.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan C. Hoyos at **786 2465007**
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 31, 2012

JUAN CARLOS HOYOS
7128 NW 50TH ST
MIAMI, FL 33166

SUBJECT: FIGURAS PERFECTAS, CORP.
Ref. Number: P08000098097

We have received your document for FIGURAS PERFECTAS, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 412A00015645

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 in order to change its registered office or registered agent, or both in the State of Florida

1. The name of the corporation: FIGURAS PERFECTAS CORP.
2. The principal office address: 7128 NW 50TH ST. MIAMI, FL. 33166
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/14/2012 Document number: P08000098097

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)

LISSET MAVAREZ (RESIGNED)

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

JUAN CARLOS HOYOS

7128 NW 50TH ST, MIAMI, FL 33166

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

Astrid Duque

Signature of an officer or director

ASTRID DUQUE (PRESIDENT)

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

Juan Carlos Hoyos

Signature of Registered Agent

05/14/2012

Date

If signing on behalf of an entity:

Typed 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
CR2F015 (03/12)

FILED
12 JUN 11 PM 3:05
TALLAHASSEE, FLORIDA