P09000079999

(R	Requestor's Name)	
(A	oddress)	_
(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
· (B	Business Entity Name)	
(D	Oocument Number)	
Certified Copies	Certificates of Status	
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SECRETARY OF STATE SIVISION OF CORPORATION:

R-A.

MAR 1 8 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: GOOD Name of Corporation
DOCUMENT NUMBER: <u>P0900079999</u>
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:
Name of Contact Person
Firm/Company
814 Ponce de Leon Suite 405
Coral Carlet FL 33134 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Eduardo Crocial at (786) 280 384/ 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 ofF (orido)
in order to change its registered office of registered agent, or oom, in the state of 1 fortide.
1. The name of the corporation:
2. The principal office address: 814 Ponce de Leon Blud Suite 405
Cooal Gables, FL 33134
3. The mailing address (if different): Strol
4. Date of incorporation/qualification: 09/25/09 Document number: P09 0000 79999
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) Education Garcio
Suite 513
Min: Pl 33131
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Suite 405
Suite 405 P.O. Box NOT acceptable (Coc) (U.L.) (U
Coral Cubles, FC 33134
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 of the corporation has been notified in writing of the change.
Edwindo Garcia - PSTD
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.
03/08/2013
Signature of Registered Agent Date
If signing on behalf of an entity:
Goya Cog.
Typed or Printed Name

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