

To: 18506176380 From: Rosalia Abad 6-22-18 4:36pm p. 2 of 3

P09000091208

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : NEIMAN & INTERIAN, PLLC  
Account Number : I20180000010  
Phone : (305) 530-9400  
Fax Number : (305) 530-9409

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: RABAD@NIFLALAW.COM

REGISTERED AGENT CHANGE  
ACUMEN REAL ESTATE ADVISORS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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

Pursuant to the provisions of sections 607.0502, 617.0302, 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, to the State of Florida.

- 1. The name of the corporation: ACUMEN REAL ESTATE ADVISORS, INC.
- 2. The principal office address: 20803 BISCAYNE BOULEVARD SUITE 501  
AVENTURA, FL 33180
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 11/04/2009 Document number: P09000091208

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)

LAMONT NEIMAN INTERIAN & BELLET, P.A.  
2020 Ponce De Leon Blvd, SUITE 1005B  
CORAL GABLES, FLORIDA 33134

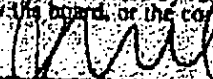
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NEIMAN & INTERIAN, PLLC  
2020 PONCE DE LEON BLVD, SUITE 1005B  
CORAL GABLES, FLORIDA 33134  
P.O. Box NOT acceptable


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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.

  
 \_\_\_\_\_  
Signature of an officer or director **CARLOS BERNER, PRESIDENT**  
Typed 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. If this document is being filed merely to reflect a change in the registered office address, I hereby certify that the corporation has been notified in writing of this change.

  
 \_\_\_\_\_  
Signature of Registered Agent **Alberto Interian**  
Date 6/15/2018

If signing on behalf of an entity:  
Alberto Interian, Manager  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6127, TALLAHASSEE, FL 32314  
 CR7ED-15 (03/12)

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