P0900000940074

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(0.1,7.2.1.2.2,7.7.1.0.1.2.1.7)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Linky Name)			
(Document Number)			
Certified Copies Certificates of Status			
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FEB 06 -

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: Ena T. Diaz, P.A.	
Name	of Corporation	
DOC	UMENT NUMBER: P09000096074	
The e	nclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning the	is matter to the following:
Ena T	. Diaz	
Name	of Contact Person	
Ena T	. Diaz, P.A.	
Firm/	Company	-
6619	South Dixie Highway #573	
Addre	ess	
Miam	i, Florida 33143	
City/S	State and Zip Code	
	enadiazlaw@gmail.com	
E-ma	ail address: (to be used for future annu	al report notification)
For fi	urther information concerning this matter	, please call:
Ena T	°. Diaz	at (305)399-2022
	Name of Contact Person	at (305) 399-2022 Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to th	e Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	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

tatement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this enge is submitted for a corporation organized under the laws of the State of Florida	
	r to clumge its registered office or registered agent, or both, in the State of Florida.	
l. The n ame of t	the corporation: Ena T. Diaz, P.A.	
2. The principal	office address: 6619 South Dixie Highway #573	
Miami, Florida 3.		
B. The mailing a	address (if different): Same as above	
4. Date of incorp	poration/qualification: 12.01.2009 Document number: P09000096074	
5. The name and	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	Ena T. Diaz	
	Ena T. Diaz, P.A.	
	8950 SW 74th Court, Suite 2201, Miami, Florida 33156	1
5. The name and (if changed):	Annette Alzate	
	ncio	
	Palacio Palesso & Zimmerman LLC P.O. Box NOT acceptable	
	12002 SW 128th Court, Suite 106, Miami, FL 33186	
	ess of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Mou	Ena T. Diaz	
•	Printed or typed name and title	
I furth er agree of my duties, ar docu ment is be	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this inc filed merely to reflect a change in the registered office address, I hereby confirm that the special points in the change.	
me	gnature of Registered Agent Date	
If signing on be	chalf of an entity:	
Annette Alzate		
	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 CR2E045 (03/13)

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