

P10000003277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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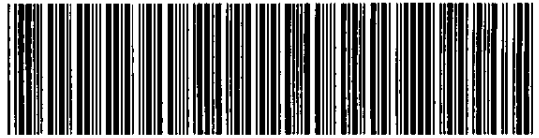
(Business Entity Name)

(Document Number)

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2/11/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CLARO SERVICES CORP
Name of Corporation

DOCUMENT NUMBER: P10000003277

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 CLARO
Name of Contact Person

CLARO SERVICES CORP
Firm/Company

1581 W 49 ST 313
Address

HIALEAH FL 33012
City/State and Zip Code

jvs10550@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIGUEL DEL DESCARA at (786) 556-8524
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 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: CLARO SERVICES CORP
2. The principal office address: 1304 NW 23 CT MIAMI FL 33125 US
3. The mailing address (if different): 1581 W 49 ST 313 HIALEAH FL 33012 US
4. Date of incorporation/qualification: 01/11/2010 Document number: P10000003277
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)

JUAN CLARO 1304 NW 23 CT MIAMI FL 33125 US

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

MIGUEL DEL DESCARA

7295 W12 AVE HIALEAH FL 33012

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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

Juan Claro PD

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.



Signature of Registered Agent

2-5-2010

Date

If signing on behalf of an entity:

Miguel Del Descara

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 (8/05)