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(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: THAQUAY OF FLOVIDA COVP. Name of Corporation DOCUMENT NUMBER: \$100000005159			
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:			
Robert De Aranjo, ESS Name of Contact Person			
Law office of Ratuel Re Army's			
1221 Brickell Ave, 900			
Miami, FL 33131 City/State and Zip Code			
Rafeel & de afaujo law. con E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Protice) le Aranjo, Esq at (305) 541-6899 Name of Contact Person at (305) S41-6899 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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 C
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Itaquera Flavida Corp
2. The principal office address: 11900 Biscay Le Blud, 508
Miami, FL 33181
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/19/10 Document number: P1000005159
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)
Aurora Penalner, Esq
2655 Le Jenne Koad 508 8 7
Coral Gables, FL 33 134 3 5 F
6. The name and street address of the new registered agent (if changed) and /or registered office
(If changed):
Law office of horael the Arango
1221 Brickell tuene, Stre 900 P.O. Box NOT acceptable
Miami, FL 33131
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 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 8/15/14 Date
If signing on behalf of an entity:
A afael le Aranjo, President Law Office of Ratione) Typed or Printed Name PA
* * * FILING FEE: \$35.00 * * *