

P100000B242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

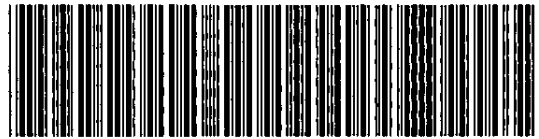
(Document Number)

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*[Handwritten signature]*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GRANADA PROFESSIONAL SERVICES INC.  
Name of Corporation

**DOCUMENT NUMBER:** P10000013242

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:

YASMINE BALLY  
Name of Contact Person

GRANADA PROFESSIONAL SERVICES INC.  
Firm/Company

14805 S.W. 97 CT.  
Address

MIAMI FL 33176  
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YASMINE BALLY at ( 305 ) 710-0580  
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

RECEIVED  
2010 FEB 23 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: GRANADA PROFESSIONAL SERVICES INC.
2. The principal office address: 14805 S.W. 97 CT. MIAMI FL 33176
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/17/2010 Document number: P10000013242
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)

KEVIN BALLY

14805 SW 97 CT  
Miami FL 33176

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

YASMINE BALLY

14805 S.W. 97 CT.

P.O. Box NOT acceptable

MIAMI FL 33176

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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.

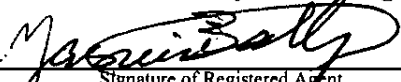
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.

  
Signature of an officer or director

YASMINE BALLY 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

02/17/2010

Date

If signing on behalf of an entity:

YASMINE BALLY PD

Typed or Printed Name

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