P10000043218

(Req	uestor's Name)	
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COVER LETTER

	nent Section of Corporations					
SUBJECT:	De Emesco (
	Name of Corporation					
DOCUMENT N	NUMBER:P1000	00043218				
The enclosed Sta	atement of Change of Registered Office/A	Agent and fee are submitted for filing.				
Please return all	correspondence concerning this matter to	the following:				
	Otto D. Go	nzalez				
	Name of Conta	ct Person				
De Emesco Corp.						
	Firm/Com					
	8500 SW 8th Stre	et. Suite 254				
	Addres					
	Miami Florid	2 22144				
	Miami, Florid City/State and 2	Zip Code				
	·	•				
	johanna_gg62@h	otmail.com				
	E-mail address: (to be used for futu	re annual report notification)				
For further inform	nation concerning this matter, please call	:				
	Otto D. Gonzalez	at (786) 2037863 Area Code & Daytime Telephone Number				
N	ame of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35	5.00 check made payable to the Departme	ent of State.				
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

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

statement of ch	ange is submitted for a c	corporation organize	607.1508, or 617.1508, Flood under the laws of the Sta	te of Florida		
		,,	d agent, or both, in the Sta	te of Florida.		
The name of the corporation: <u>De Emesco Corp.</u> The principal office address: <u>8500 SW 8th Street, Suite 254, Miami, Florida 33144</u>						
3. The mailing	address (if different):					
4. Date of incor	poration/qualification: _	05/19/2010	Document number:	P10000043218		
	d street address of the cu rtment of State: (If resign		at and registered office on f			
	Manuel Del Valle		-	P 1 1		
	7300 NW 19th Str	eet, Suite 101				
	Miami, Florida 331	126		Section 3		
6. The name and (if changed):	d street address of the ne	w registered agent (i	f changed) and /or register	ed office		
	D. Ruben Fajardo	Jr.		· · · · · · · · · · · · · · · · · · ·		
	8500 SW 8th Stree					
	Miami, Florida 331	P.O. Box NOT ac	ceptable			
The street addreas changed will	ess of its registered office be identical.	ce and the street add	dress of the business office	e of its registered agent,		
Such change w authorized by the	as authorized by resolut he board, or the corpora	tion duly adopted by tion has been notifi	y its board of directors or ed in writing of the chang	by an officer so e.		
Signatu	ire of the or director		Otto D. Go	onzalez e and title		
I hereby accept I further agree of my duties, ar document is bet corporation ha.	the appointment as reg to comply with the prov and I am familiar with an ing filed merely to reflec s been notified in writin	ristered agent and a visions of all statute. It accept the obliga of a change in the ro g of this change.	gree to act in this capacit s relative to the proper an tion of my position as reg egistered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the		
J. Mul	en Tagai of	> \	07/11/2	011		
	ehalf of an entity:		Date			
D.	Ruben Fajardo Jr.					

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