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(Requestor's Name)

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(City/State/Zip/Phone #)

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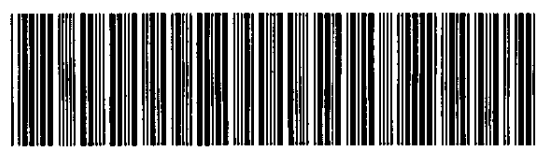
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**COVER LETTER**

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DIVISION OF CORPORATIONS  
16 SEP 19 AM 9:25

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 2500 Receiver, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P10000060480

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:

James E. Saunders III, Esq.  
Name of Contact Person

Saunders Legal Strategies and Solutions, PLC  
Firm/Company

15757 Pines Blvd., Ste. 119  
Address

Pembroke Pines, FL 33027  
City/State and Zip Code

jes@saunderslegalstrategies.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Saunders III at (954) 459-1919  
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: 2500 Receiver, Inc.

2. The principal office address: 2135 N.E. 197th Terrace, North Miami Beach, Florida 33179

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: July 22, 2010 Document number: P10000060480

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)

Beltran Accounting Services Corp.  
6303 Blue Lagoon Drive, Ste. 400  
Miami, FL 33126

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

James Saunders III, Esq.  
15757 Pines Blvd., Ste. 119  
P.O. Box NOT acceptable  
Pembroke Pines, FL 33027

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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, or the corporation has been notified in writing of the change.

*E. M. Segall*  
Signature of an officer or director

E. M. Segall, President  
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.*

*James S. Saunders III*  
Signature of Registered Agent

9-13-16  
Date

If signing on behalf of an entity:

James Saunders III  
Typed or Printed Name

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