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## GOVER LETTER

Division of Corporations	
SUBJECT: MC 36	O, INC.
DOCUMENT NUMBER: P1000	'
The enclosed Statement of Change of Regis	lered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Concepcion	n MARCOS ame of Contact Person
MC 360	INC. Firm/Company
	Firm/Company
9144 SW	152 PA+h Address
	Address
	1 33196 ity/State and Zip Code
Marcosjesu	ised for future annual report notification)
E-mail address: (to be	used for future annual report notification)
For further information concerning this mat	ter, please call:
Concepcion MARCOS	at ( 786 ) 556 - 35/9 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35,00 check made payable to	the Department of State.
Mailing Address:	Street Address:
Amendment Secti	on Amendment Section
Division of Corpe P.O. Box 6327	orations Division of Corporations Clifton Building
Tallahassee, FL 3	-
	Tallahassee, FL 32301

CR2E045 (0.M12)

TO: Amendment Section

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

Pursuant to the p statement of char in order		for a corpor	ution c	organized	under the	laws g	f the Sta	ue of _	FLORI		
1. The name of t	he comoration:	MC 3	60,	INC	·						
2. The principal	office address:_	9144	sω	152	Path	, Mi	ami,	FI:	3319	<u>(</u>	
3. The mailing ac	ddress (if differe	mt):_5AM	€					1.			
4. Date of incorp	oration/qualific	ation:	18.	2010	_ Docume	nt num		1000	0009	44.	50
5. The name and Florida Depart	street address o tment of State: (				and regist	ered of	ffice on	file wi	th the		
	JIME	NEZ, M	I 1A u	RILIO							
		SW 2			+				<del></del>		
	MIAMI	Fl. 3	315	55					表 11kg 20kg 20kg	19 HA	
6. The name and (if changed);	street address o	of the new reg	 ristered 	d agent (i	'changed)	and /o	r registe	ered off	ices in a	HAY 16 F	
		CEPCIO							.5% 055	PN 2: \$8	Ö
	9144	f SW	52	PAT	h ntable				VQES	<del>ග</del> ලා	
	Mia	Mi, Fl	1								
The street addre	ess o <del>f it</del> s register be identical.	red office an	 d the s 	treet add	ress of the	busine	ss offic	e of its	registe	red age	nt,
Such change was	authorized by	resolution d corporation l	l uly ad jas bed	opted by en notifie	its board o d in writin	of directing of the	nors or e chang	by an c ge.	officer s	o	
Sideria	e d'An officer or dire	ecton		<u>C</u>	oncepc	t O V)	MAR typed main	COS e and title	PRE	SiDEN	+
I hereby accept I further agree t performance of agent. Or if the hereby forfirm	the appointment to comply with the organization of the organizatio	t as registere he provision Lam familian ecing filed ma	s of al. with a rely to	nt and ay l statutes and accep o reflect a	rec to act , relative to at the oblig change o	in this the projection the re-	capacii oper ai of my p gistere	tv. id com osition	plete as regi:	stered	
		<del></del>			05.1	5.1°	Date				_
If signing on bel	half of an entity						byart				
Ty	sped or Printed Name										
		* * * \$	T THE LAY	C FEE: 9	35 00 * *	*					

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314