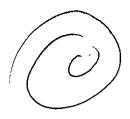
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

Amendment Section Division of Corporations

TO:

	MAGU			
SUBJECT:		L. CORP of Corporation		
DOCUMENT NUM	MBER:P	10000096738		
				
The enclosed Staten	nent of Change of Registered C	Office/Agent and fee are submitt	ed for filing.	
Please return all cor	respondence concerning this m	atter to the following:		
•	,			
_	Daniel	J. Serber, Esq. Contact Person		
_	Name of	Contact Person	12.	
Serber & Associates, P.A.				
Firm/Company				
		•		
2875 NE 191 Street, Suite 801				
		Address		
Aventura, FL 33180				
Aventura, FL 33180 City/State and Zip Code				
	South a Control			
info@serberlawfirm.com E-mail address: (to be used for future annual report notification)				
•	L-man address. (to be used i	or ruture annual report notific	cation)	
For further informat	ion concerning this matter, plea	ase call:		
_				
	Daniel J. Serber e of Contact Person	at (<u>305</u>) Area Code & Daytim	932-6262	
INAIII	e of Contact Ferson	Area Code & Daytiii	le Telephone Number	
Enclosed is a \$35.00	check made payable to the De	epartment of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Sec		
	Division of Corporations P.O. Box 6327	s Division of Cor Clifton Building	•	
	1.O. DOX 0347	Cition bunding	6	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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 ch	ange is submitted for a corporation organized under the laws of the State of \overline{Flo}	•	
in orde	er to change its registered office or registered agent, or both, in the State of Flo	rida.	
1. The name of	the corporation: MACU L. CORP		
2. The principal	office address: 18201 Collins Avenue Unit Spa 101		
Sunny Isla	es Beach, FL 33160		
3. The mailing	address (if different): 18201 Collins Avenue Unit Spa 101		
Sunny Is	sles Beach, FL 33160		
4. Date of incor	poration/qualification: 11/29/2010 Document number: P10	0000096738	
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the .	
	ALEX D SIRULNIK, ESQ.	5	
	1000 E. HALLANDALE BEACH BLVD, SUITE B	SECRE	II FEB
	HALLANDALE BEACH FL 33009	ASS	8 8
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	CRETARY OF STATE LAHASSEE, FLORID	X
	Daniel J. Serber, Esq.	RID,	l: 07
	2875 NE 191 Street, Suite 801		
	P.O. Box NOT acceptable		
	Aventura, FL 33180		
The street address changed will	ess of its registered office and the street address of the business office of its ${\bf r}$ be identical.	egistered agent,	
Such change wanthorized by the	s authorized by resolution duly adopted by its board of directors or by an of board, or the corporation has been notified in writing of the change.	ficer so	
	Marcelo Poj		
I hereby accept I further agree of my duties, ar document is be	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and comply of a line and accept the obligation of my position as registered a ling filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.	ete performance igent. Or, if this confirm that the	
	2/16/11		
Sig	mature of Registered Agent Dule		
If signing on be	chalf of an entity:		
T	yped or Printed Name		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILES