

P110000016332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

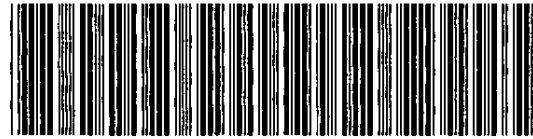
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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Change

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TALLAHASSEE FLORIDA

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8/10/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CASOCA CORP

Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

**CARLOS CABRERA**

Name of Contact Person

**CASOCA CORP**

Firm/Company

**429 LENOX AVENUE SUITE 4W04**

Address

**MIAMI BEACH, FL 33139**

City/State and Zip Code

**carlos@casoca-corp.com**

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

For further information concerning this matter, please call:

**CARLOS CABRERA**

Name of Contact Person

at ( **305** ) **322 0632**

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

Dear Ms Lewis,

This is Carlos Cabrera, the CEO and owner of Casoca Corp, a company settled in Miami Beach, FL 33139.

Some days ago I sent a filled out form to change the registered agent name and address that we used to have but, for some reason, that form was not accepted. I also enclosed a \$35 check and our bank account was already charged for that amount of money.

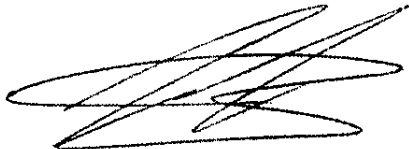
I called some days ago to ask for some advice to complete the form and explained the situation. The amendment section person I spoke to told me I don't have to pay the \$35 check again and I should send this information straight to Thelma Lewis, which is you.

I hope you can make the proper changes and switch the previous agent name and address for the new one.

Thank you very much.

Yours sincerely,

Carlos Cabrera  
CEO

A handwritten signature in black ink, appearing to be 'Carlos Cabrera', with a stylized, overlapping loop structure.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 26, 2012

CARLOS CABRERA  
CASOCA CORP  
429 LENOX AVENUE, SUITE 4W04  
MIAMI BEACH, FL 33139

SUBJECT: CASOCA CORP  
Ref. Number: P11000016332

We have received your document for CASOCA CORP and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 112A00019711

**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: CASOCA CORP
2. The principal office address: 429 LENOX AVENUE SUITE 4W04, MIAMI BEACH, FL 33139
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/16/2011 Document number: P11000016332

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)

ORTIZ, ALEX

354 SEVILLA AVE

CORAL GABLES, FL 33134

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

CABRERA, CARLOS

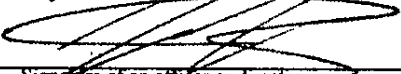
450 ALTON ROAD

P.O. Box NOT acceptable

MIAMI BEACH, FL 33139

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

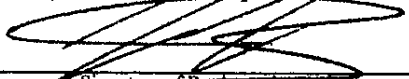
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

MR CARLOS CABRERA, CEO

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

08/01/2012

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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