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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LOLYPU Appraisal Processing and Administrative Name of Corporation Services Inc
DOCUMENT NUMBER: P11000056397
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:
Warren Fraser Name of Contact Person
LOUJEN (Secabone) Firm/Company
16375 NE 18th Ave, Suite 321
N. Miami Beach, FL 33162 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (954) 243 - 828 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LOUISN Appraisal Processing and Administration
2. The principal office address: 16375 NE 18th Ave, suite 321 - N. Miami Beach, FL 3316
3. The mailing address (if different):
4. Date of incorporation/qualification: June 16, 2011 Document number: P11 0000 56397
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) Wayren Fraser—
Loujen Appraisal Processing and Administrative Judices 16375 NE 18th Ave, suite 221
N. Mami Beach, FL 33162
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
16375 NE 18th Ave, suite 321 ===================================
N. Miami Beach FL 33162 P.O. Box NOT acceptable
The street address of its registered office and the street address of the business office of its registered agents 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 of the corporation has been notified in writing of the change.
Wayren Fraser - President Signapure of an officer or director 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 5/13/20/3 Date
If signing on behalf of an entity:
LOUISM EIN #45-2549191 Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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