P11000070017

(Requestor's Name)
(Address)
(Address)
,
(City (Chata 77:11 (Discuss 40)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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OCT 2 1 2011

EXAMINER

CORPÖRATE ACCESS,

"When you need ACCESS to the world"

INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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WALKIN								
		PICK UP	: 10-19-11					
		CERTIFIED COPY						
	文	РНОТОСОРУ						
		CUS						
	X	FILING	RA Change					
1. 2.	-	(CORPORATE NAME AND DOCUMEN						
3.	_	(CORPORATE NAME AND DOCUMEN	T`#)					
4.	-	(CORPORATE NAME AND DOCUMEN	T#)					
5 .	_	(CORPORATE NAME AND DOCUMEN	T #)					
6.	_	(CORPORATE NAME AND DOCUMEN	(F#)					
SPE	CIAL	INSTRUCTIONS:						

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, i ange is submitted for a corporation organized under the laws of the State of FLORIC		
	er to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of	the corporation: MINT 5101 CORPORATION		
2. The principal	office address: C/O Paracorp Incorporated, 236 East 6th Avenue		
Tallahas	see, FL 32303	····	
_	address (if different): C/O Paracorp Incorporated, 236 East 6th Avenue assee, FL 32303		
4. Date of incor	poration/qualification: 08/04/2011 Document number: P110000)70017	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	ROTH, LEONARDO		
	201 S BISCAYNE BLVD 905		7 <u>44.</u>
	MIAMI FL 33131		NOISLAND
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	1.0CT 20	N of Conporation
	Paracorp Incorporated	PM	
	236 East 6th Avenue	స్ట ~	P.A.
	P.O. Box NOT acceptable	8	7
	Tallahassee, FL 32303		. 4
The street addre as changed will	ess of its registered office and the street address of the business office of its register be identical.	red agent,	
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer s ne board, or the corporation has been notified in writing of the change.	0	
Signator	Gabriel F. Gaber Boschiazz Printed or typed name and title	0	
I hereby accept I further agree to of my duties, an document is bei corporation has	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 complete pet ad I am familiar with and accept the obligation of my position as registered agent. ing filed merely to reflect a change in the registered office address, I hereby confirm to been notified in writing of this change.	rformance Or, if this n that the	
1/4	1 CC 10/12/11		
Sign	nature of Registered Agent Date		
If signing on be	half of an entity:		
FARAC	OFF INCORPORATED		
Tj	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)