## P11000085640

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## **COVER LETTER**

TO: Amendment Section Division of Corporations							
SUBJECT: Cuerpos Health and Esthetic, Corp  Name of Corporation							
Name of Corp	oration						
DOCUMENT NUMBER: P11000085640							
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:							
Alexis M B	orrero						
Name of Contact Person							
Cuerpos Heath and Esthetic, Corp							
Firm/Com	pany						
8410 W Flagler St, Suite 206-B							
Address							
Miami, Fl 33144 City/State and Zip Code							
City/State and I	zip code						
N/A							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Alexis M Borrero	at ( 305 ) 824 7002						
Name of Contact Person	at ( 305 ) 824 7002 Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 check made payable to the Departme	ent 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

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

statement of ch	e provisions of sections 60 ange is submitted for a c	orporation organize	ed under the lav	vs of the State	e of Florida		
in ord	er to change its registere	ed office or registere	d agent, or bot	h, in the State	e of Florida.		
	the corporation: Cuer			Corp			
2. The principa	l office address: 8410 V	V Flagler St, Su	ite 206- B	Miami , f	FI 33144		
3. The mailing	address (if different):	Same			,		
4. Date of incor	rporation/qualification: _	09/29/2011	Document r	number:	P1:1000085640		
	d street address of the cu artment of State: (If resign			d office on fil	le with the SECOND		
	Rurh Planas				ASS. F		
	8410 W Flagler St, Suite 206-B						
	Miami, Fl 33144				57 %		
6. The name an (if changed):	d street address of the ne	ew registered agent (	if changed) and	l /or registere	d office		
	Alexis M Borrero			·			
	8410 W Flagler St						
		P.O. Box NOT ac	eceptable				
	Miami, Fl 33144				<del></del> .		
The street addr as changed wil	ess of its registered offi I be identical.	ce and the street ad	dress of the bu	siness office	of its registered agent,		
Such change wauthorized by t	as authorized by resoluthe board, or the corpora	tion duly adopted bation has been notif	y its board of ied in writing	directors or b	by an officer so		
$\triangle$	Javes ure of an officer or director	<del></del> .	Ale	xis M Borre	ero, MGR		
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment as reg to comply with the prov nd I am familiar with ar sing filed merely to refle is been notified in writin	gistered agent and a visions of all statute nd accept the obliga act a change in the r ng of this change.	agree to act in es relative to th ation of my pos registered offic	this capacity ne proper and ition as regis se address, I	, d complete performance stered agent. Or, if this hereby confirm that the		
26	gnature of Registered Agent			12/01/20	011		
Si	gnature of Registered Agent	<del></del>		Date			
If signing on be	ehalf of an entity:						
	Alexis M Barrero	<del></del>					
	Lyned or Printed Name						

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