P12000003944

(Requestor's Name)			
(Address)			
(13314-1)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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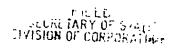
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SIVISION OF CORPORATION

JUN 21 2018 J. W. CINALIN

COVER LETTER



TO: Amendment Section **Division of Corporations** 2010 JUN 19 AM 11: 14

SUBJECT: LEK Management, Inc.				
Name of Corporation				
DOCUMENT NUMBER: P12000003944				
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:				
Lauren Kairalla				
Name of Contact Person				
LEK Management, Inc.				
Firm/Company				
8374 SW 47TH STREET				
Address				
Miami, FL 33155				
City/State and Zip Code				
ryankair@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Lauren Kairalla Name of Contact Person Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number				
Name of Contact Person 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 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

	e provisions of sections 607.0 502 , 617.0502 nange is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of Florida
-	ler to change its registered office or registe	,
1. The name of	the corporation: LEK Management,	Inc.
	al office address: 8374 SW 47TH ST	REET
Miami, Fl		
3. The mailing a	address (if different): Same	
4. Date of incor	rporation/qualification: 1/12/2012	
	nd street address of the current registered ag artment of State: (If resigned, enter resigned	•
	KAIRALLA, LAUREN	
	9820 SW 60TH STREET	
	MIAMI, FL 33173	ASSIGNATION LA VISION
6. The name and (if changed):	nd street address of the new registered agent	∵ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	KAIRALLA, LAUREN	RPOR ATTE
•	8374 SW 47TH STREET	
	P.O. Box NOT a	ecepuable
	MIAMI, FL 33155	
The street address changed will	ress of its registered office and the street ac Il be identical.	ddress of the business office of its registered agent.
Such change wa authorized by th	as authorized by resolution duly adopted the board, or the corporation has been notified.	ov its board of directors or by an officer so fied in writing of the change.
X		CEO
I hereby accept I further avree t	ure of an officer or director I the appointment as registered agent and to comply with the provisions of all statut f my duties, and I am familiar with and acc his document is being filed merely to reflec to that the corporation has been notified in	Printed or typed name and title agree to act in this capacity. es relative to the proper and complete cept the obligation of my position as registered et a change in the registered office address, I writing of this change.
X		6/1/2018
Sign	gnature of Registered Agent	Date
If signing on bel	chalf of an entity:	
·j~	Constitution of State	
IŞ	Typed or Printed Name	/~.
	* * * FILING FEE	\$35.00 * * *