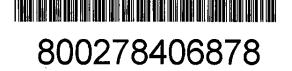
712000066378

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		,		

Office Use Only



10/28/15--01007--003 **35.00

2815 OCT 28 PH 12: 17

OCT 3 0 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

_{subject:} Dasaro Enterprise, Inc.

Name of Corporation

P1200006378

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:

Raiza J. Torres

Name of Contact Person

Dasaro Enterprise, Inc.

Firm/Company

16179 SW 154 Court

Address

Miami, FL, 33177

City/State and Zip Code

Raiza_torres@hotmail.com

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

For further information concerning this matter, please call:

Raiza J. Torres

,786

365-2923

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
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 cha	, nge is submitted for a corporation or,	0502, 607.1508, or 617.1508, Florida Statuto ganized under the laws of the State of <u>Flo</u> rid gistered agent, or both, in the State of Florid	la
1. The name of t	he corporation: Dasaro Enterp	rise, Inc.	
2. The principal	office address: 16179 SW 154	Court, Miami, FL, 33177	
3. The mailing a	ddress (if different): 13727 SW	152 Street, # 249, Miami, FL, 3	3177
4. Date of incorp	poration/qualification:	Document number: P1200000	06378
	street address of the current registere tment of State: (If resigned, enter resi	ed agent and registered office on file with the gned)	:
	Raiza J. Torres		
16179 SW 154 Court,		ami, FL, 33177	IIS OCT
		And the state of t	28 ARY ASSE
6. The name and (if changed):	street address of the new registered a	agent (if changed) and /or registered office	PHI2: I
	Vanessa G. Sampaio		₩ 1
	16179 SW 154 Court, Mi	ami, FL, 33177	
	P.O. Box	NOT acceptable	
The street addre	ss of its registered office and the str be identical.	eet address of the business office of its regi	stered agent,
Such change wa authorized by th	is authorized by resolution duly adopte board, or the corporation has been	oted by its board of directors or by an office i notified in writing of the change.	er so
Raiza J. Torres			
I fuilther agrée i nerformance of	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with ar	Printed or typed name and title and agree to act in this capacity. statutes relative to the proper and complete ad accept the obligation of my position as re reflect a change in the registered office ada and the complete of this change.	egisterea
Vinde	(n	10/19/2015	
v vy	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Vanessa C	S. Sampaio		
T	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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