

P/200001211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

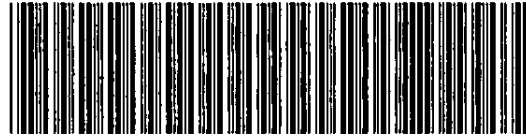
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. LEWIS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** C+H Communications II, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P12000012111

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:

Cynthia Vidal  
Name of Contact Person

C+H Communications II, Inc  
Firm/Company

947 Lenox Avenue #305  
Address

Miami Beach FL 33139  
City/State and Zip Code

cynthiaj888@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia Vidal at ( 954 ) 274-2120  
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**

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: C+H Communications II, Inc.  
2. The principal office address: 71 NE 42nd Street  
Miami FL 33137  
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 2/3/12 Document number: P12000012111

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)

Cynthia Vidal  
71 NE 42nd Street  
Miami, FL 33137

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Elisabet Ramirez  
2104 NE 40th Road  
P.O. Box NOT acceptable  
Homestead, FL 33033

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The street address of its registered office and the street address of the business office of its registered agent, 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, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Cynthia Vidal  
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.

Elisabet Ramirez  
Signature of Registered Agent

12/3/12  
Date

If signing on behalf of an entity:

Elisabet Ramirez  
Typed 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

CR2B045 (03/12)

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