## P12000013986

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





000275167070

07/27/15--01024--019 \*\*35.00



JUL 28 2015 C McNAIR

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: DIAZ BRISCOE MEDINA P.A.

Name of Corporation

DOCUMENT NUMBER: P12000013986

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:

Miguel A. Maspons, Esq.

Name of Contact Person

Maspons, Sellek, Jacobs, LLP

Firm/Company

2333 Ponce De Leon Blvd., Suite 314

Address

Coral Gables, Florida 33134

City/State and Zip Code

msj@msjcorpserv.com

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

For further information concerning this matter, please call:

Vanessa M. Collazo

. 786

539-1430

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, 617.050 statement of change is submitted for a corporation organ			
in order to change its registered office or regis			
1. The name of the corporation: DIAZ BRISCOE	MEDINA P.A.		
2. The principal office address: 100 S.E. 2nd Street, Suite 2020, Miami, Florida 33131			
3. The mailing address (if different): Same as above	/e.		
4. Date of incorporation/qualification: 02/09/2012 Document number: P12000013986			
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resign	agent and registered office on file w	with the	
Richard A. Cahlin (Resigned	l)	_	
1001 Brickell Bay Drive, Suit	te 1400	_ಿ ನ	
Miami, Florida 33131		5 JUL 2	
6. The name and street address of the new registered age (if changed):	ent (if changed) and /or registered o	office	
MSJ Corporate Services, LL	C	- 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
2333 Ponce De Leon Blvd.,	Suite 314	설계 8	
P.O. Box NOT acceptable			
Coral Gables, Florida 33134		_	
The street address of its registered office and the street as changed will be identical.	address of the business office of i	its registered agent,	
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been no	d by its board of directors or by an otified in writing of the change.	officer so	
Marine .	Miguel A. Maspons, EsqAt	ttorney-In-Fact	
Signature of an officer or director	Printed or typed name and ti	itle	
I hereby accept the appointment as registered agent at I further agree to comply with the provisions of all states performance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to ref hereby confirm that the corporation has been notified.	tutes relative to the proper and cor accept the obligation of my positio lect a change in the registered offi	mplete m as registered ice address, I	
March College	July 24, 2015		
Signature of Registered Agent	Date	-	
If signing on behalf of an entity:			
Mercedes M. Sellek, Esq.			
Typed or Printed Name * * * FILING FI	FF+ \$35 00 * * *		
11011011	ABA WWW.UU		

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