

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IRIS N. CORTEZ P.A.
Name of Corporation

DOCUMENT NUMBER: P12000023573

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:

IRIS N CORTEZ
Name of Contact Person
IRIS N CORTEZ P.A.
Firm/Company
20185 EAST COUNTRYCLUB DR. #2306
Address
AVENTURA/FLORIDA 33180
City/State and Zip Code
irisncortez@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IRIS N CORTEZ at (305) 331-0411
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

