112000056674

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MA1L
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
!		

Office Use Only



800241213708

10/31/12--01010--004 **35.00

RAROLS

NOV T- 2012 T. ROBERTS SECRETARY OF STATE SIVISION OF CORPORATIONS

COVER LETTER

TO:

Amendment Section Division of Corporations

GURLEGE 6400 GROUP INC

Name of Corporation

DOCUMENT NUMBER:

P12000056674

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:

Manuel Hernandez

Name of Contact Person

6400 Group Inc.

Firm/Company

PO Box 562710

Address

Miami, FL 33256

City/State and Zip Code

3hproperties@bellsouth.net

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

For further information concerning this matter, please call:

Manuel Hernandez

.,305

594-8699

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	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: 6400 Group Inc
2. The principal	office address: 15190 SW 136 St, Suite # 1, Miami, FL 33196
3. The mailing a	address (if different): PO Box 562710, Miami, FL 33256
4. Date of incorp	poration/qualification: 06/22/2012 Document number: P12000056674
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Sergio A Fleites, C.P.A.
	1575 SW 87 Avenue
	Miami, FL 33174
6. The name and (if changed):	Sergio A Fleites, C.P.A. 1575 SW 87 Avenue Miami, FL 33174 d street address of the new registered agent (if changed) and /or registered office Manuel Hernandez
	Manuel Hernandez
	15190 SW 136 Street, Suite # 1
	P.O Box NOT acceptable Miami, FL 33196
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Simatu	Manuel Hernandez - PTD Printed or typed name and title
I hereby accept I further agree t performance of agent Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity, to eomply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
X I	nature of Registered Again
	shalf of an entity:
Ty	yped or Printed Name

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