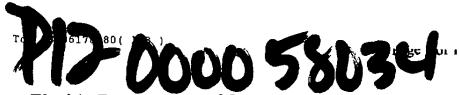
9/2/2015 3:38:27 PM From: **Division of Corporations** 



#### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850) 205-8842

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:

#### REGISTERED AGENT CHANGE TAVERNIER CORPORATE CONSULTANTS INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: TAVERNIER CORPORATE CONSULTANTS INC.

Name of Corporation

DOCUMENT NUMBER: P12000

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:

### **Gustavo Garcia-Montes**

Name of Contact Person

Gustavo J. Garcia-Montes, P.A.

Firm/Company

2333 Brickell Ave., Suite A-1

Address

Miami, FL 33129

City/State and Zip Code

## ggm@agmlawgroup.com

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

For	mather	intomation	concerning	unis	matter,	please c	all:
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Name of Contact Person Area Code & Daytime Telephone Num

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: TAVERNIER CORPORATE CONSULTANTS INC.	
2. The principal office address: 153 ATLANTIC AVE., TAVERNIER, FL 33070	
3. The mailing address (if different): 2333 BRICKELL AVE., SUITE A-1, MIAMI, FL 33129	
4. Date of incorporation/qualification: 06/28/2012 Document number: P12000058034	
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)	
GUSTAVO GARCIA-MONTES	
2333 BRICKELL AVE., SUITE A-1	
MIAMI, FL 33129	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	<u>~</u>
CT CORPORATION SYSTEM	31.70
	SED!
P.O they NOT acceptable	_
PLANTATION, FL 33324  The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	0
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.	
Patricia Belanger, Attorney In Fact Signatule of an officer of director 1  Patricia Belanger, Attorney In Fact Printed or typed name and title	
I hereby accept the appoinment 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.	
Patricia Belander 09/01/2015 Signature of Refishered Agent Dane	
If signing on behalf of an entity:	
Patricia Belanger, Asst. Secretary  Typed or Printed Name	

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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 \* \* \*