

PI2000082277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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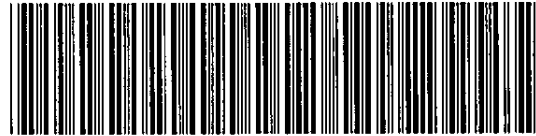
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BEFANA PROPERTIES CORP.  
Name of Corporation

**DOCUMENT NUMBER:** P12000082277

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:

LORENA FELDMAN, ESQ.  
Name of Contact Person

FELDMAN & ASSOCIATES.  
Firm/Company

2750 NE 185<sup>th</sup> SUITE 202  
Address

AVENTURA, FL 33180.  
City/State and Zip Code

LORENA @ FELDMANCLOSINGS.COM.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORENA FELDMAN, ESQ. at (786) 288-5699  
Name of Contact Person Area Code & Daytime Telephone Number  
or 561-255-4690. 5

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: BEFANA PROPERTIES CORP.
2. The principal office address: 2750 NE 185<sup>th</sup> SUITE 202, AVENTURA,  
FL 33180
3. The mailing address (if different): SAME.
4. Date of incorporation/qualification: SEPT 27, 2012. Document number: P120000 82277.
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)

FELDMAN LORENA, ESQ.  
2875 NE 191<sup>st</sup> Suite 801  
AVENTURA, FL, 33180.

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

FELDMAN LORENA, ESQ.  
2750 NE 185<sup>th</sup> SUITE 202  
AVENTURA, FL, 33180.

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA  
NEW ADDRESS.

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

LORENA FELDMAN, ESQ.  
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.*

  
Signature of Registered Agent

LORENA FELDMAN, ESQ.  
Date

If signing on behalf of an entity:

(REGISTERED  
AGENT).

\_\_\_\_\_  
Typed or Printed Name

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