P12000087247

| (Re | equestor's Name) | |
|---|-------------------|-------------|
| (Ac | idress) | |
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| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Na | me) |
| (Document Number) | | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: Three A Signs Name of Corporation | | |
| DOCUMENT NUMBER: \$12000087247 | | |
| 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: | | |
| Giorge R. Santiago Name of Contact Person | | |
| Three A Signs Firm/Company | | |
| 7500 W. Flagler St. | | |
| Miami, FL 33144 City/State and Zip Code | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| For further information concerning this matter, please call: Gibarge R. Santiago at (786) 370-3494 Name of Contact Person Area Code & Daytime Telephone Number | | |
| Name of Contact Person Area Code & Daytime Telephone Number | | |
| Taclosed is a \$35.00 check made payable to the Department of State. | | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building | | |
| Tallahassee, FL 32314 Cinton Bunding 2661 Executive Center Circle Tallahassee, FL 32301 | | |



November 21, 2013

GIORGE R. SANTIAGO THREE A SIGNS INC 7500 W. FLAGLER ST. MIAMI, FL 33144

SUBJECT: THREE A SIGNS INC Ref. Number: P12000087247

We have received your document for THREE A SIGNS INC. However, the document has not been filed and is being returned for the following:

The fee to file your document is \$35.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 113A00026898



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: Three A Signs 2. The principal office address: 7500 w. Flaglev St. Miami, FL 33144 |
| 2. The principal office address: 7500 w. Flaglev St. |
| Miami, #4 33144 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 10/16/12 Document number: P1200008724 |
| 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) |
| Giorge R. Santiago = |
| Giorge R. Santiago 2500 W. 78th St. Bay 7 |
| 11. 1. 1. El 2201/2 ' |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Giorge R. Santiago |
| Giorge R. Santiago 7500 W. Flagler St. P.O. Box NOT acceptable |
| P.O. Box NOT acceptable Miami, FL 33144 |
| |
| 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. |
| Giorge R. Santiago, President Signature of an officer or director Giorge R. Santiago, President |
| 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 11 / 15 / 13 Date |
| If signing on behalf of an entity: |
| Giorge R. Santiago Typed or Printed Name |
| * * * FILING FEE: \$35.00 * * * |

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