

Division of Corporations

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Florida Department of State
Division of Corporations
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(((H14000109542 3)))



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To: Division of Corporations
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REGISTERED AGENT CHANGE
ALTUR BUSINESS CORP.

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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5/12/14



Fox Rothschild LLP
ATTORNEYS AT LAW

DATE: 2014-05-09 13:59:23 EDT

FACSIMILE TRANSMITTAL SHEET

TO/COMPANY:Altur Business Corp. - Document
#P12000099719**TO FAX NUMBER:**

18506176380

FROM:

Lagana, Vanessa

NOTES/COMMENTS:**Ladies and Gentlemen:**

Attached please find the Change of Registered Agent Form for Altur Business Corp. - Document #P12000099719, for filing with the Florida Division of Corporations.

Please proceed accordingly.

Best regards,

Vanessa Lagana
Legal Assistant
Fox Rothschild LLP
Southeast Financial Center
200 South Biscayne Boulevard
Suite 3590
Miami, FL 33131
(305) 442-6544 - direct
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALTUR BUSINESS CORP.
Name of Corporation

DOCUMENT NUMBER: P12000099719

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:

VANESSA LAGANA
Name of Contact Person
FOX ROTHSCHILD LLP
Firm/Company
Southeast Financial Center, 200 South Biscayne Boulevard, Suite 3590
Address
Miami, Florida 33131
City/State and Zip Code
VLAGANA@FOXROTHSCHILD.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA LAGANA at (305) 442-6544
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

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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: ALTUR BUSINESS CORP.
2. The principal office address: 355 ALHAMBRA CIRCLE, STE. 801, Coral Gables, FL 33134
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/06/2012 Document number: P120000997193
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)

REGISTERED AGENT CORPORATE SERVICES, INC.
355 ALHAMBRA CIRCLE, STE. 801, Coral Gables, FL 33134

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 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.

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]
Signature of an officer or director

Gisela Fernandez, Director

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.

By: [Signature]

Signature of Registered Agent

4/29/14

Date

If signing on behalf of an entity:

Danijela Byers, Assistant Secretary

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

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