

P13000005714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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T. CARTER

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 OCT -9 PM 4:14

RA/RO CHANGE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2014

ECOPLEX MIRO, INC.  
2100 PARK AVE, #404 SOUTH  
MIAMI BEACH, FL 33139 US

SUBJECT: ECOPLEX MIRO, INC.  
Ref. Number: P13000005714

RECEIVED  
14 OCT -9 AM 10:59  
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TALLAHASSEE, FLORIDA

We have received your document for ECOPLEX MIRO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tina D Carter  
Regulatory Specialist

Letter Number: 014A00019719

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**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: ECOPLEX MIRO INC
2. The principal office address: 2100 PARK AVENUE #404  
MIAMI BEACH, FL 33139 US
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/16/2013 Document number: PL3000005714

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)

LAW OFFICES OF KRAVITZ & GUERRA PA.  
800 BRICKELL AVE #701  
MIAMI, FLORIDA 33131

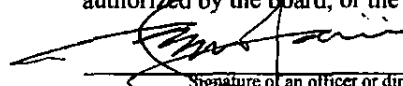
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

FABIO GASPARINI  
2100, PARK AVE #404  
MIAMI BEACH, FL, 33139

P.O. Box NOT acceptable

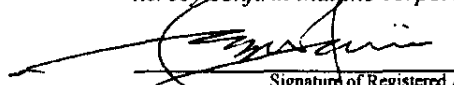
The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

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

FABIO GASPARINI - PRESIDENT  
\_\_\_\_\_  
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

SEP 30TH 2014  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)

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