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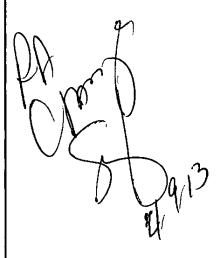
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Miami Concepts Group, Inc.

Name of Corporation

DOCUMENT NUMBER:

P13000023286

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:

Samantha Jackson

Name of Contact Person

Meriam Corporate Services Inc

Firm/Company

PO Box 52588

Address

Mesa AZ 85208

City/State and Zip Code

meriamfinancial@gmail.com

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

For further information concerning this matter, please call:

Samantha Jackson

3 720ر

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

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida i ion organized under the laws of the State of or registered agent, or both, in the State of I	Florida
1. The name of	the corporation: Miami Conc	cepts Group, Inc.	
2. The principal	l office address: 1700 NW 66	6th Ave Ste 104 Plantation FL 33	3313
3. The mailing a 3047 N	address (if different): KELLEF	R CONSULTING	
		013 Document number: P1300	)0023286
	d street address of the current regularities of State: (If resigned, enter	gistered agent and registered office on file wer resigned)	rith the
	Mark A Berardo		
	170 NW 66th Ave		ZE ZE
	Plantation FL 33317		APR CRET
6. The name and (if changed):	•	tered agent (if changed) and /or registered of	
	Mark A Berardo		PH 12: 1
	1700 NW 66th Ave Ste	e 104	77 A
		D. Box NOT acceptable	
	Plantation FL 33313		•
The street address changed will	ess of its registered office and the identical.	he street address of the business office of it	s registered agent,
Such change wanthorized by the	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an been notified in writing of the change.	officer so
Markett	Land of the ordinactor	Mark A Berardo, Preside	
I hereby accept I further agree performance of agent. Or, if th	t the appointment as registered to comply with the provisions of my duties, and I am familiar whis document is being filed mere.	Printed or typed name and till agent and agree to act in this capacity, if all statutes relative to the proper and con ith and accept the obligation of my position by to reflect a change in the registered officatified in writing of this change.	
04/01/2013			
If signing on be	gnature of Registered Agent chalf of an entity:	Date	
Т	yped or Printed Name	—	
	* * * FIL	ING 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)