

P/3000032330

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(Business Entity Name)

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2/13/15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 2, 2015

JUAN ORLANDO MORENO
1011 SUNNYBROOK RD
SUITE: 901
MIAMI, FL 33136 US

SUBJECT: SOUTHCOAST RESEARCH CENTER, INC
Ref. Number: P13000032330

We have received your document for SOUTHCOAST RESEARCH CENTER, 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

An officer/director must authorize the change(s) by signing the document.

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: 215A00002045

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SouthCoast Research Center . Inc
Name of Corporation

DOCUMENT NUMBER: P13000032330

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:

Juan Orlando Moreno

Name of Contact Person

Firm/Company

1011 SunnyBrook Rd Suite: 901

Address

Miami , Florida 33136

City/State and Zip Code

omoreno@southresearch.org

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

For further information concerning this matter, please call:

Juan Orlando Moreno

Name of Contact Person

at (786) 343 - 6937

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

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: SouthCoast Research Center , Inc
2. The principal office address: 1011 SunnyBrook Rd Suite: 901
Miami , Florida 33136
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4-9-13 Document number: P13000032330

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)

Juan O Moreno Nunez

8660 West Flagler Street Suite :102

Miami , Florida 33144

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

1011 SunnyBrook Rd Suite: 901

P.O. Box NOT acceptable

Miami , Florida 33136

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

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

President

19th JANUARY 2015
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)