P13000043273

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10/28/20

COVER LETTER

TO:	Amendment Section Division of Corporations	
	•	•
SUBJ	ECT: Karters Holding Corp	
Name	of Corporation	
DOC	UMENT NUMBER: P13000043273	
The e	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this	s matter to the following:
Rafae	l Fabian	
Name	of Contact Person	
Rafae	l Fabian PA	
Firm/9	Company	
3860	SW 8th Street, Suite 200	•
Addre	ess	
	Gables, FL 33134	
City/S	State and Zip Code	
	rafael@fabianpa.com	
E-ma	il address: (to be used for future annua	report notification)
For fu	urther information concerning this matter, p	please call:
Rafae	l Fabian	21 (305) 856-6700
	Name of Contact Person	at (305) 856-6700 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ingressively ingests submitted for a corporation organized under the laws of the State of	
	r to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Karters Holding Corp.	_
	office address: 3860 SW 8th Street, Suite 200, Coral Gables, FL 33134	-
3. The mailing a	ddress (if different): 3860 SW 8 Street, Suite 200, Coral Gables, FL 33134	_
	poration/qualification: 05/15/2013 Document number: P13000043273	
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	Rafael Fabian PA	
	10631 N Kendall Drive, Suite 145	
	Miami, FL 33176	
6. The name and (if changed):	Miami, FL 33176 Street address of the new registered agent (if changed) and /or registered office Street address of the new registered agent (if changed) and /or registered office Street Street address of the new registered agent (if changed) and /or registered office Street Street Street address of the new registered agent (if changed) and /or registered office Street	
	Rafael Fabian, PA	*
	Rafael Fabian, PA Rafael Fabian, PA SST PR Rafael Fabian, PA 3860 SW 8th Street, Suite 200	
	P.O. Box NOT acceptable	
	Coral Gables, FL 33134	
The street addreas changed will	ess of its registered office and the street address of the business office of its registered agen be identical.	t.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.	
	Silvia M. Barrera	
	re of an officer or director Printed or typed name and title	
I further agree t of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performant the subject of the obligation of my position as registered agent. Or, if the property to reflect a change in the registered office address, I hereby confirm that the bean partitled in writing of this change.	ce is ie
	8/28/220	
If signing on be	half of an entity:	
Rafael Fabian, as	s President of Rafael Fabian, P.A.	
	yped or Printed Name	

* * * FILING FEE: \$35.00 * * *