

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please

Email Address:

REGISTERED AGENT CHANGE **CORREDOR HOLDINGS CORP**

Certificate of Status Certified Copy 0 03 Page Count \$35.00 Estimated Charge

R. WITHIL

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: CORREDOR HOLDINGS CORP	
Name of Corporation	
DOCUMENT NUMBER: P13000100107	
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:	
Gustavo Garcia-Montes	
Name of Contact Person	
Gustavo J. Garcia-Montes, P.A.	
Firm/Company	
2333 Brickell Ave., Suite A1	
Address	
Miami, FL 33129	
City/State and Zip Code	
ggm@agmlawgroup.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Contact Person at (
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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1. statement of change is submitted for a corporation organized una	ler the laws of the State of Florida
in order to change its registered office or registered age.	
1. The name of the corporation: CORREDOR HOLDINGS CORP 2. The principal office address: 2333 BRICKELL AVE., SUITE A-1, MIAMI, FL 33129	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/17/2013 D	ocument number: P13000100107
5. The name and street address of the current registered agent and Florida Department of State: (If resigned, enter resigned)	I registered office on file with the
GUSTAVO J GARCIA-MONTES	
2333 BRICKELL AVE., SUITE A-1	ALLA
MIAMI, FL 33129	St. 1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): CT CORPORATION SYSTEM	
CT CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND ROAL	
PLANTATION, FL 33324	
The street address of its registered office and the street address as changed will be identical:	of the business office of its registered agent,
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.	
Patricia Belander Patr	icia Belanger, Attorney In Fact
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 duites, 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 bereby confirm that the corporation has been notified in writing of this change.	
Patricia Belander 09/0 Signature of Registered Agent	01/2015
If signing on behalf of an entity:	
Patricia Belanger, Asst. Secretary Typed or Printed Name	

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