14000012932

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: La Colonia Wellness Center, INC			
Name of Corporation			
DOCUMENT NUMBER: P14000012932			
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:			
Trouble return an eoriespondence centering and makes to the vene and			
Danay Acevedo, Esq.			
Name of Contact Person			
Miami Legal Firm			
Firm/Company			
5757 Blue Lagoon Drive, suite 320			
Address			
Miami, FL 33126			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Danay Acevedo, Esq. at 305 265-2266 Name of Contact Person Area Code & Daytime Telephone Number			
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 chang	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this see is submitted for a corporation organized under the laws of the State of Florida o change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	corporation: La Colonia Wellness Center, INC
2. The principal of	ffice address: 167 West 23 Street Hialeah, FL 33010
	107 M. H. 00 Chroat History El. 22010
3. The mailing add	dress (if different): 167 West 23 Street Hialeah, FL 33010
	D14000012932
4. Date of incorpo	ration/qualification: 02/10/2014 Document number: P14000012932
5. The name and s	street address of the current registered agent and registered office on file with the nent of State: (If resigned, enter resigned)
	Acevedo, Yenin
	4901 SW 87 AVE
-	Miami, Florida 33165
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
_	Danay Acevedo, Esq.
	5757 Blue Lagoon Drive, suite 320
•	P.O. Box NOT acceptable
	Miami, Florida 33126
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
	Seolo Yenin Acevedo, P_
· ·	e of an officer or director Printed or typed name and title
🔝 I further agree <u>t</u>	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 The proper and I am familiar with and accept the obligation of my position as registered The state of the composition as a composition of the registered office address, I The properties that the corporation has been notified in writing of this change.
Leun	author of Registered Agent 2 1 1 Date
If signing on be	half of an entity:
T	rped or Printed Name

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