P14000025880

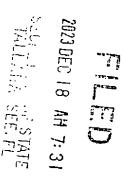
(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

Amendment Section

TO:

Division of Corporations	
SUBJECT: Restoration 1 of West Palm Beach Inc.	
Name of Corporation	
DOCUMENT NUMBER: P14000025880	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Alex Soto	
Name of Contact Person	
The Soto Law Group	
Firm/Company 2400 E Commercial Blvd. Suite 400	
Address	
Fort Lauderdale, FL 33308	
City/State and Zip Code	
alex@sotolawgroup.com	
E-mail address: (to be used for future annual	l report notification)
For further information concerning this matter, p	please call:
Alex Soto	at (954)567.1776
Name of Contact Person	at (954)567.1776 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
1.0. DOX 0327	A REST THE SERVICE SEC. S.A. R. SHARAMBARAMATER SEC.

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation orgal er to change its registered office or regist	nized under the laws of the State o	f Florida
	the corporation: Restoration 1 of West Pal		i F 107 taa.
	office address: 960 W 41st St, Miami Bea		
3. The mailing a	address (if different): 741 6th St, Unit 201	, Miami Beach, FL 33139	
4. Date of incorp	address (if different): 741 6th St, Unit 201 poration/qualification: 3/20/2014	Document number: P14000	025880
5. The name and	d street address of the current registered artment of State: (If resigned, enter resign	agent and registered office on file	
	GRANDAL, NICHOLAS, ESQ		
	1600 Ponce de Leon Blvd		
	Suite 1107 Coral Gables FL 33134		2023 D
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered	office $\overline{\mathbb{C}}$
	The Soto Law Group, P.A.		
	2400 E Commercial Blvd. Suite 400		
	P.O. Bo Fort Lauderdale, FL 33308	ox NOT acceptable	- ω
The street address changed will	ess of its registered office and the street be identical.	address of the business office of	its registered agent,
Such change was authorized by the	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by a otified in writing of the change.	an officer so
jk Z	re of an officer or director	Tamas Krisztian/Presiden	
Lhandha acan	the appointment as registered agent as to comply with the provisions of all sta nd I am familiar with and accept the ob- ing filed merely to reflect a change in the s been notified in writing of this change	tutes relative to the proper and ca ligation of my position as registe he registered office address, I her 2.	omplete performance red agent. Or, if this rehy confirm that the
		12-8	·-23
Sig	enature of Registered Agent	Date	
5 0	chalf of an entity:		
	x Soto		
T	'yped or Printed Name * * * FILING F	EE: \$35.00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314