

P14000035591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

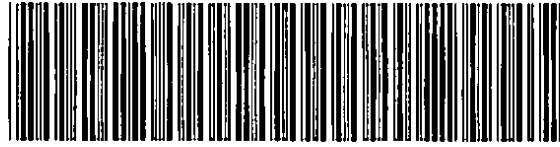
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INTERNATIONAL CAPITAL VENTURES CORPORATION
Name of Corporation

DOCUMENT NUMBER: P14000035591

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:

MIRIAM MANFREDI

Name of Contact Person

INTERNATIONAL CAPITAL VENTURES CORPORATION

Firm/Company

1800 SOUTH OCEAN DRIVE APT 1805

Address

HALLANDALE, FLORIDA 33009

City/State and Zip Code

LINA.SARMIENTO@TIBERSERVICES.COM

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

For further information concerning this matter, please call:

MIRIAM MANFREDI

Name of Contact Person

at (754) 304-8697

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: INTERNATIONAL CAPITAL VENTURES CORPORATION
2. The principal office address: 1800 SOUTH OCEAN DRIVE. APT 1805. HALLANDALE, FLORIDA 33009

3. The mailing address (if different): 1800 SOUTH OCEAN DRIVE. APT 1805. HALLANDALE, FLORIDA 33009

4. Date of incorporation/qualification: APRIL 14, 2014 Document number: P14000035591

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)

TIBER SERVICES LLC

1800 SOUTH OCEAN DRIVE. APT 1805

HALLANDALE, FLORIDA 33009

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

MIRIAM MANFREDI

1800 SOUTH OCEAN DRIVE. APT 1805

P.O. Box NOT acceptable

HALLANDALE, FLORIDA 33009

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

MIRIAM MANFREDI

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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

01/04/19

Date

If signing on behalf of an entity:

MIRIAM MANFREDI

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)