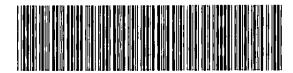
P14000434240

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
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(Document Number)							
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Special Instructions to Filing Officer.							

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THE OCT 19 PM IN THE STATE

2018 OCT 19 AM 9: 42

C. GOLDEN

OCT 22 2019

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 451649 8108485

AUTHORIZATION

COST LIMIT : (\$35.00

ORDER DATE: October 19, 2018

ORDER TIME : 2:07 PM

ORDER NO. : 451649-020

CUSTOMER NO: 8108485

CHANGE OF AGENT

NAME: PGNM INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: ROXANNE TURNER EXT 62969

EXAMINER'S INITIALS:

COVER LETTER

TO:	Amendment Section Division of Corporations						
SUBJ	PGNM INC						
	Name of C	orporation					
DOC	P14000043426 UMENT NUMBER:	,					
The e	enclosed Statement of Change of Registered Offic	e/Agent and	fee are submitted for filing.				
Please	e return all correspondence concerning this matte	r to the follo	wing:				
	Jared Hirsch, Esq.						
Firm/Company							
	Add	ress					
E-mail address: (to be used for future annual report notification)							
	urther information concerning this matter, please						
Jarec	d Hirsch, Esq.	786 at (9233369				
	Name of Contact Person	Area	Code & Daytime Telephone Number				
Enclo	osed is a \$35.00 check made payable to the Depar	tment of Stat	e.				
Mailing Address: Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314		A D C 20	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 cha	nge is submitted for	s 607.0502, 617.0502 a corporation organi ered office or registe	zed under the la	ws of the Stat	e of Florida	his	
1. The name of t	he corporation: PGN	M INC					
2. The principal	office address: 1515	NW 167th St., Suite	336, Miami Gar	rdens FL 331	69		
3. The mailing a	ddress (if different):	1515 NW 167th St.,	Suite 336, Mian	ni Gardens FI	L 33169		
4. Date of incorp	oration/qualification	05/14/2014	Document	number: P14	1000043426		
5. The name and	street address of the	current registered ag signed, enter resigned	gent and register				
	NIZNIK, ROBERT (3					
	1966 NE 123RD ST	. SUITE 210				~ 1	
	NORTH MIAMI		FL	33181		0.810	957
6. The name and (if changed):	street address of the	new registered agen	t (if changed) an	id /or register	λς Υ	2018 OCT 19	
	Corporation Service	e Company			OF S SEE,	A	
	1201 Hays Street					9: 42	
	Tallahassee	PO Box NOT	seceptable FL	32301		•	
The street addre	ess of its registered of be identical.	office and the street a	ddress of the bi	isiness office	of its registere	d ager	Ħ.
Such change wa authorized by th	as authorized by reso board, or the corp	olution duly adopted oration has been not	by its board of o ified in writing (directors or b of the change	y an officer so		
	/		Jared Hirsch, E		and tilla		
I hereby accept I further agree performance of agent. Or, if the hereby confirm Corporatio By:	to comply with the p. my duties, and I am is document is being	registered agent and rovisions of all statu familiar with and act filed merely to reflet has been notified in any Roxanne Turn Asst. Vice Presidents	l agree to act in tes relative to th ecept the obligat ct a change in t writing of this l	he proper and tion of my po he registerea	, l complete sition as regist	ered , 1	
·		MODE VILLE FIEST	JOH				
ī	yped or Printed Name	* * * FILING FEI	E: \$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)