

P14000050437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

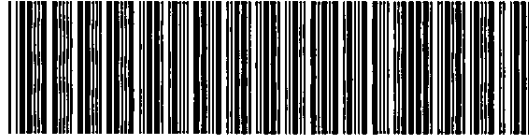
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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C. CARROLLERS

CINOTTI LLP
ATTORNEYS-AT-LAW
66 West Flagler Street, Suite 1002, Miami, Florida 33130
TEL: (786) 577-2291; FAX: (646) 478-9147
WWW.CINOTTILAW.COM

December 18, 2015

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

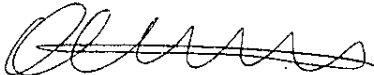
Re: Change of Registered Agent for MCKEY INC, a Florida corporation

Dear Sir or Madam:

On behalf of the above mentioned Corporation I submit an application for change of registered agent along with a check for \$35 to pay for filing fee.

If you have any questions or need additional information please do not hesitate to contact me.

Sincerely,



Alessandra Piras, Esq.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **MCKEY INC**

Name of Corporation

DOCUMENT NUMBER: **P14000050437**

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:

ALESSANDRA PIRAS, ESQ.

Name of Contact Person

CINOTTI LLP

Firm/Company

66 W FLAGLER STREET #1002

Address

MIAMI, FL 33130

City/State and Zip Code

APIRAS@CINOTTILAW.COM

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

For further information concerning this matter, please call:

ALESSANDRA PIRAS

Name of Contact Person

at (**786**) **577-2291**

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: MCKEY INC
2. The principal office address: 66 W Flagler Street #1002, Miami, FL 33130
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/11/2014 Document number: P14000050437
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)

STEFANIA BOLOGNA, ESQ

150 SE 2ND AVENUE #1010

MIAMI, FL 33130

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

ALESSANDRA PIRAS, ESQ

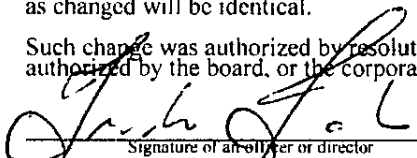
CINOTTI LLP, 66 W FLAGLER ST #1002

P.O. Box NOT acceptable

MIAMI, FL 33130

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

Fabrizio Isidori, Director

Printed or typed name and title

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 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.

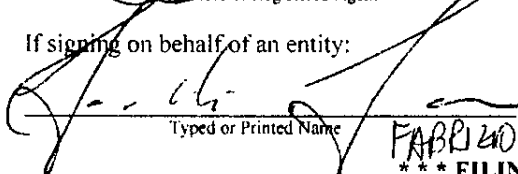


Signature of Registered Agent

12/1/2015

Date

If signing on behalf of an entity:



Typed or Printed Name

FABRIZIO ISIDORI, DIRECTOR/PRESIDENT
***** 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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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