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MAR 08 20H R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Change of registered office address

Name of Corporation

DOCUMENT NUMBER: P14000099821

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:

Juan Morillo

Name of Contact Person

M&M Property Development Corp

Firm/Company

6405 NW 36th St, Suite 214

Address

Miami, FL 33166

City/State and Zip Code

juanbautistamorillo@gmail.com

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

For further information concerning this matter, please call:

Juan Morillo

...305

684-2824

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 change	is submitted for a corporation organ	02, 607.1508, or 617.1508, Florida Statu nized under the laws of the State of Flori	da
	change its registered office or regist or property Depreparation: M&M Property Depreparation of the control of	tered agent, or both, in the State of Floric evelopment Corp	da.
The name of the co The principal office	te address: 6405 NW 36th St.	, suite 214, Miami, FL 33166	
3. The mailing address	ss (if different):		
4. Date of incorporat	ion/qualification: 12/15/2014	Document number: P140000	99821
5. The name and stree		agent and registered office on file with the	ıe
JU	AN MORILLO		
833	33 NW 53RD ST, SUITE	400	
MI	AMI, FL 33166		73 7
6. The name and stree (if changed):	et address of the new registered age	nt (if changed) and /or registered office	
JU	AN MORILLO		
640	05 NW 36TH ST, SUITE	214	* 2
MI	P.O. Box NOT AMI, FL 33166	Cacceptable	gra.
The street address of as changed will be id	its registered office and the street lentical.	address of the business office of its reg	istered agent,
Such change was aut authorized by the bo	horized by resolution duly adopted and, of the corporation has been no	l by its board of directors or by an offic tified in writing of the change.	er so
Signature of an	nonlicer on director	JUAN MORILLO / PRESID	ENT
l further agree to cop performance of my d agent. Or, if this doo	ppointment as registered agent and polywith the provisions of all state uties, and I am familiar with and a cument is being filed merely to reflice corporation has been notified in	utes relative to the proper and complete accept the obligation of my position as r ect a change in the registered office ad	; egistered dress, I
A	* * * *	03/01/2017	
Signature If signing on behalf	of degistered Agent of an entity:	Date	
JUAN MORILL			
Typed or	Printed Name		

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

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