P15000028738

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Corones, Inc.

Name of Corporation

P15000028738

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:

I. Barry Blaxberg

Name of Contact Person

Blaxberg, Grayson, Kukoff & Forteza, P.A.

Firm/Company

25 SE 2nd Avenue, Ste 730

Address

Miami, FL 33131-1696

City/State and Zip Code

blaxberg@blaxgray.com

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

For further information concerning this matter, please call:

Barry Blaxberg

.,305

381-7979

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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida.
	the corporation: Corones Inc.
2. The principal	office address: 525 N. Federal Hwy, Fort Lauderdale, FL 33301
	04 Jala of Vanisa Driva Fort Laudardala El 22204
3. The mailing a	ddress (if different): 91 Isle of Venice Drive, Fort Lauderdale, FL 33301
4. Date of incorp	poration/qualification: March 27, 2015 Document number: P15000028738
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Gray Robinson Law Firm, Aronold M. Zipper
	401 East Las Olas Blvd., 1000
	Fort Lauderdale, FL 33301
6. The name and (if changed):	Gray Robinson Law Firm, Aronold M. Zipper 401 East Las Olas Blvd., 1000 Fort Lauderdale, FL 33301 street address of the new registered agent (if changed) and /or registered office Blaxberg, Grayson, Kukoff & Forteza, P.A Attn; Barry Blaxberg
	Blaxberg, Grayson, Kukoff & Forteza, P.A Attn; Barry Blaxberg
	25 S.E. 2nd Avenue, Suite 730
	P.O. Box NOT acceptable Miami, Florida, 33131-1696
The street addreas changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Paula	Barbara W. Fleming Printed or typed name and title
I further agree performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the error ution has been notified in writing of this change. The pattern of Registered Agent Pres On the Date Date
_	chalf of an entity: Blax berg yed or Printed Name

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