## P150000 32078

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: MM Name of Corporation	XVI ENTERPRISES, INC.	
DOCUMENT NU	MBER: P15000032078	
The enclosed States	ment of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter to	the following:
CASELY, VERONIO	CA J	
Name of Contact P	erson	
MMXVI ENTERPR	ISES, INC.	
Firm/Company		·············
14359 MIRAMAR P	PKWY #460	
Address		
MIRAMAR, FL 330	27	
City/State and Zip	Code	
	BookingDetailers@gmail.com	
E-mail address: (t	to be used for future annual report no	otification)
For further informa	ntion concerning this matter, please call:	
CASELY, VERONE	CA J	t (954 )589-3389 Area Code & Daytime Telephone Number
Nar	ne of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.0	00 check made payable to the Departmen	nt of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee Fl 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted	l for a corporation orga	02, 607.1508, or 617.1508, Fi nized under the laws of the St	ate of FLORI	DA	
in orde	r to change its r	egistered office or regis	tered agent, or both, in the St	ate of Florida.		
1. The name of t	he corporation:	MMXVI ENTERPRIS	SES, INC.			
2. The principal	office address:_	14359 MIRAMAR PK	WY #460, MIRAMAR, FL 330	27		
3. The mailing a	ddress (if differe					<u> </u>
4. Date of incorporation/qualification: 04/07/2015 Document number: P150					.078	
		of the current registered (If resigned, enter resign	agent and registered office on ed)	file with the		
	WATTLEY, JO	NATHAN			~	<u></u>
	14359 MIRAMA	AR PKWY #460			<b>202</b> 0 FEB	VISION
	MIRAMAR, FL	. 33027			3 8	\. \. \.
6. The name and (if changed):	l street address o	of the new registered ago	ent (if changed) and /or registe		8 AM 9:	RY OF STATE
	CASELY, VER	ONICA J			27	-
	14359 MIRAM	AR PKWY #460				
			ox NOT acceptable			
	MIRAMAR, FL	. 33027				
The street address changed will	ess of its registe be identical.	red office and the stree	t address of the business offi	ce of its regis	tered a	gent,
Such change wa authorized by the	as authorized by he board, or the	resolution duly adopte corporation has been n	ed by its board of directors of otified in writing of the chan	r by an officer ige.	· <b>SO</b>	
مناسعين _			CASELY, VERONICA J			
	the appointment to comply with it is a complete in a constitution of the complete is been notified it.	<b>N</b>	Printed or typed to nd agree to act in this capac tutes relative to the proper a ligation of my position as re he registered office address, e.		perform t. Or, irm the	nance if this at the
	7.50	202	FEBRUARY 12, 2020			
Sig	nature of Registered	Agent	Date			
If signing on be	chalf of an entity	y:				
	Sanad on Drinted Name					

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE