P15000060480

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Be	usiness Entity Name))
(De	ocument Number)	
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"your

COVER LETTER

TO:

Amendment Section Division of Corporations

JLEIKA RAMOS, P.A.

Name of Corporation

P15000060480

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:

ZULY RAMOS

Name of Contact Person

ZULEIKA RAMOS, P.A.

15138 NW 89 AVENUE

MIAMI LAKES, FL 33018

City/State and Zip Code

ZRAMREALTY@GMAIL.COM

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

For further information concerning this matter, please call:

ZULY RAMOS

Name of Contact Person

786 237-5552
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



December 2, 2016

ZULY RAMOS 15138 NW 89 AVENUE MIAMI LAKES, FL 33018

SUBJECT: ZULEIKA RAMOS, P.A.

Ref. Number: P15000060480

We have received your document for ZULEIKA RAMOS, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 516A00025695

Carol Mustain Regulatory Specialist II

www.sunbiz.org

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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 inge is submitted for a corporation organized under the laws of the State of FLORIDA in the control of the state of Florida.
1. The name of t	he corporation: ZULEIKA RAMOS, P.A.
2. The principal	office address: 175 SW 7TH STREET #2310 MIAMI, FL 33130
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 07/15/2015 Document number: P15000060480
5. The name and	street address of the current registered agent and registered office on file with the
	trent of State: (If resigned, enter resigned) RESIGNED
	SEC THE
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	LIFESTYLE INTERNATIONAL REALTY LLC
	175 SW 7TH STREET #2310
	P.O. Box NOT acceptable MIAMI, FL 33130
The street address 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 th	as authorized by resolution duly adopted by its board of directors or by an officer so be board, of the corporation has been notified in writing of the change.
- Jules	Zuleika Ramos, President Printed or typed name and title
l'inriner aoree i	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 corporation has been notified in writing of this change.
- 1/3 sid	Mure of Registered Agent Date
If signing on be	half of an entity:
George	Cancio bello yped or Printed Name

* * * 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)