P150000034995

(Requestor's Name)				
(Áddress)				
. (Address)				
(Ĉi	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations				
ESCUCHO, INC.				
SUBJECT: Name of C	ornantion			
P15000084998	Orporation			
DOCUMENT NUMBER:				
The enclosed Statement of Change of Registered Offic				
Please return all correspondence concerning this matte	r to the following:			
JOSE KAMGA				
Name of Co	ntact Person			
Firm/Co	ompany			
1500 BAY ROAD (#818)				
Add	ress			
MIAMI BEACH, FL 33139				
City/State and Zip Code				
jose.kamga@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	call:			
JOSE KAMGA	954 249-0740			
Name of Contact Person	at () Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Depart	tment 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			

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

statement of ch	e provisions of sections 607.0502, 61 hange is submitted for a corporation ler to change its registered office or s	organized under the laws of the Sta	ate of
	ESCUCHO, INC	· ·	ne of Frontae.
2. The principa	1500 BAY ROA al office address: EACH, FL 33139		
3. The mailing	address (if different):		
4. Date of inco	orporation/qualification: 07/23/201	Document number:	15000084998
5. The name ar	nd street address of the current regist artment of State: (If resigned, enter note MCR PARTNERS, INC.	ered agent and registered office on	
	20533 BISCAYNE BLVD (13	301)	
	MIAMI, FL 33180		
6. The name ar (if changed)	nd street address of the new registere		TELET CONTRACTOR
	JOSE KAMGA		5 6 6 TM
	1500 BAY ROAD (#818)		
	MIAMI BEACH, FL 33139	ox NOT acceptable	* US
The street addras changed wil	ress of its registered office and the s	street address of the business offic	te of its registered agent,
Such change wanthorized by	vas authorized by resolution duly ad the board, or the corporation has be	lopted by its board of directors or en notified in writing of the chang	by an officer so
Signa	ture of an officer or director	JOSE KAMGA (h) (d)	deul-
I hereby accep I further agree performance o agent. 'Or, if the hereby confirn	of the appointment as registered ago to comply with the provisions of al of my duties, and I am familiar with his document is being filed merely t in that the corporation has been noti	ent and agree to act in this capacit Il statutes relative to the proper an and accept the obligation of my po o reflect a change in the registeres ified in writing of this change.	ty. id complete osition as registered d office address. I
	ignature of Registered Agent	01/22/2018	
		Date	
n signing on o	schalf of an entity:		
	Typed or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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