

P15000090233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

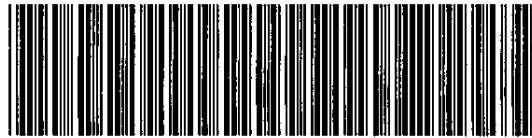
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500299058795

05/15/17--01013--027 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY 15 PM 2:41

V HERRING
MAY 18 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AERI CORP
Name of Corporation

DOCUMENT NUMBER: P15000050233

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:

RAISA DOGUE
Name of Contact Person

AERI CORP
Firm/Company

5077 NW 7th St apt 606
Address

MIAMI FL 33126
City/State and Zip Code

CUCUDECUBA@yahoo.es
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAISA DOGUE at (786) 681-2335
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AFRI CORP
2. The principal office address: 5077 NW 7th St. apt. 606
MIAMI, FL 33126
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/03/2015 Document number: P15000090233

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

YANAI TORRES
5077 NW 7th St apt. 606
MIAMI, FL 33126

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

RAISA DOGUE
5077 NW 7th St. apt. 606
MIAMI, FL 33126

P.O. Box NOT acceptable

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY 15 PM 2:41

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

RAISA DOGUE President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

05/11/2017
Date

If signing on behalf of an entity:

RAISA DOGUE
Typed or Printed Name

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