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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

PRANCENT AWATHAA DA				
SUBJECT: FRANCO LAW FIRM, P.A. Name of Corporation				
DOCUMENT NUMBER: P16000021975				
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:				
Fernando Franco Name of Contact Person				
FRANCO LAW FIRM, P.A.				
Firm/Company				
1001 Brickell Bay Dr Ste 2700 Address				
Miami FL 33131				
City/State and Zip Code				
franco@francolawfirmpa.com				
E-mail address: (to be used for future annual report notification)				
re-man address. (to be used for future annual report notification)				
	•			
For further information concerning this matter, plea	ase call:			
Fernndo Franco	at (786 )29 5321  Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.				
isherosea to a \$55.00 effect made payable to the fre	partition of state.			
MACON A LL	Studie Addings			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of change	isions of sections 607.0502, 617.0502 is submitted for a corporation organi change its registered office or registe	zed under the laws of the State of	Florida
1. The name of the co	orporation: FRANCO LAW FIRM, P.	A	
	ce address: 1001 Brickell Bay Dr Ste 27		
3. The mailing addre	ess (if different):		
4. Date of incorporat	ion/qualification: 03/01/2016	Document number: P160000	21975
	eet address of the current registered ag nt of State: (If resigned, enter resigne		rith the
Fra	nco Law Firm, P.A.		_
690	SW 1st Ct Unit 1034 MIAMI, FL 331.	30	_
(if changed):	eet address of the new registered ager		
	)   Brickell Bay Dr. Ste 2700 Miami FL	33131	· ; , • •
100	_ <del></del>	NOT acceptable	_
	If its registered office and the street dentical. Ithorized by resolution duly adopted bard, or the corporation has been no		
- Trac	an officer or director	Fernesco Frinted or typed name and i	au Co
,	appointment as registered agent anomply with the provisions of all stati un familiar with and accept the obli iled merely to reflect a change in the an notified in writing of this change.		
Franc	of Registered Agent	5/3//2°27	/
If signing on behalf	of an entity:		
Typed o	or Printed Name  * * * FILING FE	F · \$35 00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314