

1/15/2018

P16000039844

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC
Account Number : I20150000089
Phone : (305)444-8800
Fax Number : (305)444-4010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
INMOBILIARIA INVER 2 US CORP.**

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Estimated Charge	\$35.00

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Corporate Filing Menu

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**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: Inmobiliaria Inver 2 US Corp
2. The principal office address: 3700 S Ocean Blvd, Apt 1204
Highland Beach, Florida 33487
3. The mailing address (if different): _____
4. Date of incorporation/qualification: May 6, 2016 Document number: P16000039800
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)

CORPORATION COMPANY OF MIAMI

200 SOUTH BISCAYNE BOULEVARD SUITE 4100 (RJS)

MIAMI, FL 33131

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

WORLDWIDE CORPORATE ADMINISTRATORS, LLC

2230 PONCE DE LEON BLVD

P.O. Box NOT acceptable

CORAL GABLES, FL 33134

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

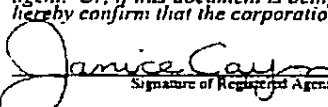
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an individual officer

Manuel Gomberoff

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 of Registered Agent

1/12/2018

Date

If signing on behalf of an entity:

Janice Cayon

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)

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