

P16000098922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

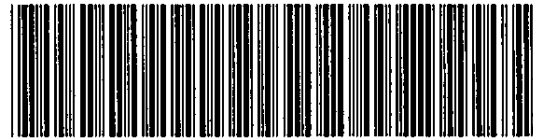
(Business Entity Name)

(Document Number)

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17 FEB -6 AM 10:46
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FEB 08 2017
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DADE Premier Services Corporation
Name of Corporation

DOCUMENT NUMBER: P160000 989 22

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:

RAUL TORRES
Name of Contact Person

DADE Premier Services
Firm/Company

860 NW 122ND AVE
Address

MIAMI FL 33182
City/State and Zip Code

RAUL PROVIDOR @ I CLOUD.COM
E-mail address: (to be used for future annual report notification)

RECEIVED
DIVISION OF CORPORATIONS
17 FEB - 6 AM 1998

For further information concerning this matter, please call:

RAUL TORRES at (305) 570-5436
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: DADE Premier Services CORPORATION

2. The principal office address: 8600 NW 122ND AVE, MIAMI FL 33182

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/15/16 Document number: PT6000098922

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)

NORLAW TORRES
88 NE 168TH ST
NORTH MIAMI BEACH, 33162

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

RAUL TORRES
860 NW 122ND AVE
P.O. Box NOT acceptable
MIAMI FL, 33182

FILED
STATE DEPT OF STATE
DIVISION OF CORPORATIONS
17 FEB -6 AM 10:46

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

RAUL TORRES
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

2/1/17
Date

If signing on behalf of an entity:

RAUL TORRES
Typed or Printed Name

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