P17000002430

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COVER LETTER

TO: Amendment Section Division of Corporations

_{SUBJECT:} J. Marcos Martinez, P.A.

Name of Corporation

DOCUMENT NUMBER: P17000002430

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:

J. Marcos Martinez

Name of Contact Person

J. Marcos Martinez, P.A.

Firm/Company

14 NE First Ave, Suite 1001

Address

Miami, FL 33132

City/State and Zip Code

mmartinezlaw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J. Marcos Martinez

_{a,}954

592-1148

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

•	ovisions of sections 607.0502, 617.0502, 607.1508, or 617 ge is submitted for a corporation organized under the laws	
	o change its registered office or registered agent, or both,	
1. The name of the o	compration: J. Marcos Martinez	
2 The principal offi	corporation: J. Marcos Martinez P. A - Fice address: 14 NE First Ave., Suite 1001, Mic	ami, FL 33132
2. The principal off	nee dadress	
3. The mailing addr	lress (if different):	
4. Date of incorpora	ration/qualification: 01/06/17 Document nu	umber: P17000002430
	treet address of the current registered agent and registered nent of State: (If resigned, enter resigned)	office on file with the
J.	. Marcos Martinez	
<u>1</u>	4 NE First Ave, Suite 1001 1703.	BISCOYNE BIVO.
<u>M</u>	/liami, FL 33131	Third Floor
6. The name and str (if changed):	treet address of the new registered agent (if changed) and	or registered office
<u>J.</u>	. Marcos Martinez	2011
14	4 NE First Ave, Suite 1001	Con-
N.A.	P O Box NOT acceptable	Company Company
<u>IVI</u>	Miami, FL 33132	
The street address of as changed will be	of its registered office and the street address of the busine identical.	ness office of its registered agent,
Such change was a authorized by the b	authorized by resolution duly adopted by its board of dir board, or the corporation has been notified in writing of	
	President	
Signature of	of an officer or director Printed (or typed name and title
I further agree to c performance of my agent. Or, if this d	e appointment as registered agent and agree to act in the comply with the provisions of all statutes relative to the y duties, and I am familiar with and accept the obligation document is being filed merely to reflect a change in the at the corporation has been notified in writing of this change.	proper and complete n of my position as registered registered office address, I
P	1/19/17	
Signatur	ure of Registered Agent	Date
If signing on behalf	lf of an entity:	
J. Marcos Mai	artinez	
Typed	ed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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