## P17060008913

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ry/State/Zip/Phone #	P)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name	)	
(Document Number)			
Certified Copies	_ Certificates o	f Status	
Special Instructions to Filing Officer:			

Office Use Only



800298218678

05/02/17--01016--021 \*\*35.00



SIN W

## COVER LETTER

TO: Amendment Section Division of Corporations

Office and registered Office address change
Name of Corporation

DOCUMENT NUMBER: P17000008918

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:

Ana Paula Santiago

Name of Contact Person

ATTICA USA INC.

Firm/Company

848 Brickell Avenue, Suite 410

Miami, Florida 33131

City/State and Zip Code

ana@gryphus.us

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

For further information concerning this matter, please call:

Ana P. Santiago

Name of Contact Person

at (786 ) 275-5414

Area Code & Daytime Telephone Num

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

		17.0302, 607.1308, or 617.1308, Florida Statutes, this a organized under the laws of the State of Florida	_
=	•	registered agent, or both, in the State of Florida.	
1. The name of	the corporation: ATTICA USA	INC	
2. The principal	office address: 848 Brickell A	venue, Suite 410, Miami, Florida, 33131	
3. The mailing a	address (if different): 848 Bricke	ell Avenue, Suite 410, Miami, Florida, 331	131
	1 10015	2047	
4. Date of incor	poration/qualification: Jan/26/2	2017 Document number: P17000008918	
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Ana Paula Santiago		
	848 Brickell Avenue, PH	15 PS = 1	
	Miami, Florida, 33131	CRET	FIL
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Ana Paula Santiago		1:09
	848 Brickell Avenue, Su	ite 410	
	P.o. B Miami, Florida, 33131	Box NOT acceptable	
The street address changed will	ess of its registered office and the lbe identical.	street address of the business office of its registered ago	ent,
		dopted by its board of directors or by an officer so een notified in writing of the change.	
(hill	Tays	Ana Paula Santiago, Secretary Printed or typed name and tifle	_
I hereby accept I further agree performance of	t the appointment as registered ag to comply with the provisions of a f my duties, and I am familiar with	ent and agree to act in this capacity.  all statutes relative to the proper and complete  and accept the obligation of my position as registered  to reflect a change in the registered office address, I  tified in writing of this change.	
(0	letraif	4/20/2017	
U	nature of Registered Agent	Date	_
• •	ehalf of an entity:		
Ana Paula	Santiago  'yped or Printed Name		
1	Jima or rimed rame		

\* \* \* FILING FEE: \$35,00 \* \* \*