P170000 47605

(Req	uestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	
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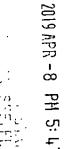
Office Use Only

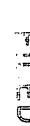


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C. GOLDEN APR 1 5 2019

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Cam Cornish PA

Name of Corporation

P17000047605

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:

Albert Campbell Cornish IV

Name of Contact Person

Cam Cornish PA

Firm/Company

2525 Ponce de Leon Blvd, Ste 300

Coral Gables, FL 33134

City/State and Zip Code

Ccornish@chglawyers.com

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

For further information concerning this matter, please call:

Albert Campbell Cornish IV
Name of Contact Person

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida. Cam Cornish PA
1. The name of	the corporation: Cam Cornish PA office address: 2525 Ponce de Leon Blvd, Ste 300, Coral Gables, FL
2. The principal 33134	office address: 2020 Force de Leon Bivd, Ste 500, Coral Gables, FE
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 5.27.2017 Document number: P17000047605
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Albert Campbell Cornish IV
	1250 S Miami Ave. Apt. 2214
	Miami, FL 33130 = 5
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Albert Campbell Cornish IV
	2525 Ponce de Leon Blvd, Ste 300
	P.O. Box NOT acceptable Coral Gables, FL 33134
The street address changed will	ess of its registered office and the street address of the business office of its registered agent.
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation-has been notified in writing of the change.
400	Albert Campbell Cornish IV, President
I hereby accept I further agree i performance of agent. Or, if the	the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete Invaluties, and Lam familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I show that the corporation has been notified in writing of this change.
4//	3.27.2019
	nature of Registered Agent Date
If signing on be	chalf of an entity:
T	yped or Printed Name

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