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Florida Department of State
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**REGISTERED AGENT CHANGE
BOTANICA: IFA ILE BUYOCO INC**

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| Certificate of Status | 0 |
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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: BOTANICA: IFA ILE BUYOCO INC
2. The principal office address: 7220 SW 8 Street Miami, FL 33144
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/31/2017 Document number: P17000048419

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)

SUPERBIZ REGISTERED AGENT, INC.7220 SW 8 StreetMiami, FL 33144

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

ALBERTO VIDAL7220 SW 8 StreetMiami, FL 33144

P.O. Box NOT acceptable

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 officer or directorALBERTO VIDAL_____
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 Agent6/7/2018_____
Date

If signing on behalf of an entity:

ALBERTO VIDAL_____
Typed or Printed Name

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