

P17000050915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Address change of register agent.

Name of Corporation

**DOCUMENT NUMBER:** PI 700050915

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:

**Victor M. Jimenez**

Name of Contact Person

Instituto de Ciencias Holisticas, Cuidado de la Piel y Desarrollo Humano. Inc.

Firm/Company

**3120 W Hallandale Bch Blvd # 526**

Address

**Hallandale FL, 33009**

City/State and Zip Code

**victormanuelhsp@gmail.com**

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

For further information concerning this matter, please call:

**Victor M. Jimenez**

Name of Contact Person

at ( **754** ) **204-3521**

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: Instituto de Ciencias Holisticas, Cuidado de la Piel Y Desarrollo Humano. Inc.

2. The principal office address: 3120 W Hallandale Bch Blvd # 526  
Hallandale FL. 33009

3. The mailing address (if different): 3120 W Hallandale Bch Blvd # 526  
Hallandale FL, 33009

4. Date of incorporation/qualification: 06/09/2017 Document number: PI7000050915

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)

Victor M. Jimenez

2719 Hollywood Boulevard A-1227 Hollywood FL 33020 USA

Change of Address

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

Victor M. Jimenez

3120 W Hallandale Bch Blvd # 526 Hallandale FL 33009

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]  
Signature of an officer or director

President

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

08/29/2017

Date

If signing on behalf of an entity:

Victor M. Jimenez

Typed or Printed Name

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

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

CR2E045 (03/12)

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TALLAHASSEE, FL 32314  
SECRETARY OF STATE