## P17000077454

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: El NUEVO orgullo Catracho Corporation  DOCUMENT NUMBER: P17000077654
DOCUMENT NUMBER: \$17000077654
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:
Esmirna Buitrago Name of Contact Person
Firm/Company
2300 SW S ST Address
MIAMU H 33135  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Esmirna Buttrago at 305, 510-1567 Name of Contact Person at 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

l. The name	e of the corporation: FL Nuevo agullo Catracho Corp
	cipal office address: 2300 Sw 8 St
manu or 33135	
3. The mail:	ing address (if different):
 4. Date of in	ncorporation/qualification: 92617 Document number: P17000077
5. The name	e and street address of the current registered agent and registered office on file with the Department of State; (If resigned, enter resigned)
	Javier Reyes
	2300 SW 8 ST
	monu Pl 33135
5. The name (if change	e and street address of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are register
	Esmirna Buitrago
	2300 SW 8 ST - TH 5
	Monu H 33135
The street a is changed	ddress of its registered office and the street address of the business office of its registered agent will be identical.
Such chang authorized b	e was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.
Las	lubat Esmirna Buitrago
J	cept the appointment as registered agent and agree to act in this capacity.
turther ac	ree to comply with the provisions of all statutes relative to the proper and complete e of my duties, and I am familiar with and accept the obligation of my position as registered if this document is being filed merely to reflect a change in the registered office address, I from that the corporation has been notified in writing of this change.
Had	Lafuf. 8/1/18
/ 0	Signature of Registered Agent Date

Make Checks Payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314

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