

P17'000080083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

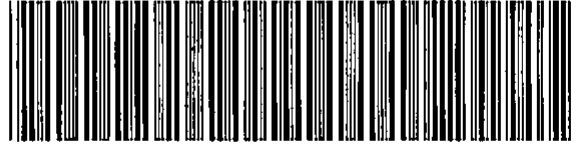
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JUN 27 2019

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2019 JUN 17 PM 5:52
SECRETARY OF STATE
TALLER, FL

RIA-CH

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **LUALIS GROUP, INC**
Name of Corporation

DOCUMENT NUMBER: **P17000080083**

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:

MARIA E SOSA

Name of Contact Person

Firm/Company

8902 NW 114TH ST

Address

HIALEAH GARDENS, FL 33018

City/State and Zip Code

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

For further information concerning this matter, please call:

MARIA E SOSA

Name of Contact Person

at (**786**) **4685902**

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: LUALIS GROUP, INC.
2. The principal office address: 2500 SW 107TH AVE SUITE 24
MIAMI, FL 33165
3. The mailing address (if different): 8902 NW 114TH ST HIALEAH GARDENS, FL 33018

4. Date of incorporation/qualification: 10/05/2017 Document number: P17000080083

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)

MARIA E SOSA

8902 NW 114TH ST

HIALEAH GARDENS, FL 33018

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

ANDRES AMAURIS GUTIERREZ CISNEROS

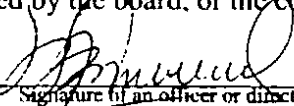
5930 WEST 25TH CT APT 104

P.O. Box NOT acceptable

HIALEAH, FL 33016

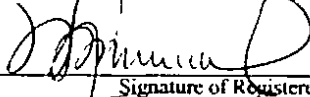
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 director

MARIA E. SOSA 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 of Registered Agent

6/10/2019
Date

If signing on behalf of an entity:

Typed or Printed Name

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

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SECRETARY OF STATE
TALLAHASSEE, FL

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