

P18000000606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

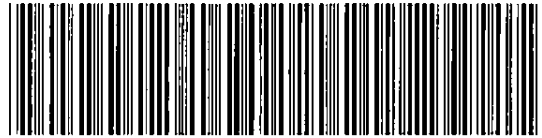
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2024 DEC 11 AM 8:13

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Prive 1404N Corp.
Name of Corporation

DOCUMENT NUMBER: P18000000606

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:

Adriana Gaviria

Name of Contact Person

AIM AG Realty LLC

Firm/Company

2950 NE 188th street #121

Address

Aventura, FL 33180

City/State and Zip Code

adrygc1128@gmail.com

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

For further information concerning this matter, please call:

Adriana Gaviria

Name of Contact Person

at (786)

5646435

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Prive 1404N Corp.
2. The principal office address: 5500 Island Estates Dr. #1405 Aventura, Fl. 33160
3. The mailing address (if different): 2950 NE 188th street #121 Aventura, Fl. 33160
4. Date of incorporation/qualification: 01/03/2018 Document number: P18000000606
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)

Registered Agents Serving Named Companies, Inc.

3971 SW 8th Street Suite 305

Miami, Fl. 33134-2951

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

Adriana Gaviria

2950 NE 188th street #121 Aventura, Fl 33180

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

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.

Adriana Castaneda Diaz
Signature of an officer or director

Adriana Castaneda Diaz/ Director, Vicepresident
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.

Adriana Gaviria
Signature of Registered Agent

09/05/2024
Date

If signing on behalf of an entity:

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 (04/13)