71800038813

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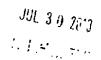


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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations
Smith NB Corp
SUBJECT: Name of Corporation
Name of Corporation
DOCUMENT NUMBER: P18000038813
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 Lopez
Name of Contact Person
Smith NB Corp.
Firm/Company
8443 SW 144th Ct.
Address
Miami, FL 33183
City/State and Zip Code
mlopez@blascoconstruction.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Maria Lopez 305 \ 409-6839
Name of Contact Person at (305) 409-6839 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Miami, FL 33183 3. The mailing address (if different): 4. Date of incorporation/qualification: O4/26/2018 Document number: P18000038813 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) Vivian Blasco 8443 SW 144th Ct. Miami, FL 33183 6. The name and street address of the new registered agent (if changed) and /or registered office Difference of the new registered agent (if changed) and /or registered office Difference of the new registered agent (if changed) and /or registered office Difference of the new registered agent (if changed) and /or registered office Difference of the new registered agent (if changed) and /or registered office Difference of the new registered agent (if changed) and /or registered office Difference of the new registered agent 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. Maria Lopez, Director Printed or typed name and title I hereby accept the approximant as registered agent and agree to act in this capacity. I hereby accept the approximant as registered agent and agree to act in this capacity. I hereby accept the approximant as registered agent and agree to the prover and complete.	in order to	change its registered office or r	egisterea agent, or noin, in the s	situe of Proritae.
Miami, FL 33183 3. The mailing address (if different): 4. Date of incorporation/qualification: O4/26/2018 Document number: P18000038813 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) Vivian Blasco 8443 SW 144th Ct. Miami, FL 33183 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Maria Lopez 8443 SW 144th Ct. P.O. Box NOT acceptable Miami, FL 33183 The street address of its registered office and the street address of the business office of its registered agent 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. Maria Lopez, Director Printed or typed name and talle 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 chalces, 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.	1. The name of the	corporation: Smith NB Corp		
4. Date of incorporation/qualification: 04/26/2018 Document number: P18000038813 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) Vivian Blasco 8443 SW 144th Ct. Miami, FL 33183 6. The name and street address of the new registered agent (if changed) and /or registered office of (if changed): Maria Lopez 8443 SW 144th Ct. P.O. Box NOT acceptable Miami, FL 33183 The street address of its registered office and the street address of the business office of its registered agent 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. 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 chaics, and I am familiar with and accept the obliquation 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.	2. The principal off	ice address: 8443 SW 144 Ct.		
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* * * FILING FEE: \$35.00 * * *