P18000 048 233

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



400335146764

U9/38/19--01006--030 **35.00

2019 SEP 30 MH 8: 27

OCT 1 8 2019 C Kinsey

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: IGGR CONSULTING CORP

Name of Corporation

DOCUMENT NUMBER: 1

P18000048233

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:

LEONARDO LUNA

Name of Contact Person

SCHOOLEY MITCHELL

Firm/Company

10773 NW 58TH ST

Address

DORAL, FL, 33178

City/State and Zip Code

leonardo.luna@schooleymitchell.com

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

For further information concerning this matter, please call:

LEONARDO LUNA

Name of Contact Person

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

statement of cha	ange is submitted for a corporation	of 17.0302, 607.1308, or 617.1308, Florida Statutes, this in organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
	the corporation: IGGR CONS	8TH ST, Suite 152, DORAL, FL, 33178	
2. The principal	office address:		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 05/25/2	018	
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	LEONARDO LUNA		
8300 NW 53RD ST, SUITE 102, MIAMI, FL, 33166			
		13 FI	
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	
	LEONARDO LUNA		
	10773 NW 58TH ST, SUIT	E 152, DORAL, FL, 33178	
	P.O. 1	Box NOT acceptable	
The street addre	ess of its registered office and the be identical.	street address of the business office of its registered agent,	
Such change wa authorized by the	ch change was authorized by resolution duly adopted by its board of directors or by an officer so horized by the board, or the corporation has been notified in writing of the change.		
Signific	ne of an office or director	LEONARDO LUNA, DIRECTOR Printed or typed name and title	
I hereby accept I further agree to performance of	the appointment as registered as to comply with the provisions of a my duties and I am familiar with	gent and agree to act in this capacity. Ill statutes relative to the proper and complete It and accept the obligation of my position as registered It to reflect a change in the registered office address, I Itified in writing of this change. 09/25/2019	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Tr	yped or Printed Name		

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