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Amendment Section

TO:

Division of Corporations		
SUBJECT: DC BEHAVIOR ANALYSIS CORP Name of Corporation		
DOCUMENT NUMBER: <u>P 18000056350</u>		
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:		
DAISY CASTRO PEREZ Name of Contact Person		
DC BEHAVIOR ANALYSIS CORP Firm/Company		
551 NW GIST. AVE		
MIAMI, FL 33126 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
DAISY CASTRO PEREZ at (786) 600-9874 Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 cheek made payable to the Department of State.		
Mailing Address: Amendment Section Street Address: Amendment Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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
I. The name of the corporation: DC BEHAVIOR ANALYSIS CORP
2. The principal office address: 551 NW Glst. AVE, MIAMI FL 33126
3. The mailing address (if different):
4. Date of incorporation/qualification: $06/25/2018$ Document number: $P1800005635$
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)
DAISY CASTRO PEREZ
551 61ST AVE
MIAMI, FL 33126
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DAISY CASTRO PEREZ
551 NW 6/st AVE
P.O. Box NOT acceptable MIOMI TI 23126
MIAMI, FL 33126
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 DAISY CASTRO PEREZ 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 07/24/2018
If signing on behalf of an entity: Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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