## P18000 061 048

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(3.1), 3.12.13.2.14. (1.3), 5.17
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## **COVER LETTER**

\* )

Division of Corporations	
SUBJECT: Tania Varela, P.A.  Name of Cor	
Name of Cor	poration
DOCUMENT NUMBER:	
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:
Tania Varela	
Name of Cont	act Person
Tania Varela, P.A.	
Firm/Con	npany
1901 Brickell Avenu	ue, Apt. B2005
Addre	SS
Miami, FL 33129	
City/State and	Zip Code
tania.varela@gmail	.com
E-mail address: (to be used for fut	ture annual report notification)
For further information concerning this matter, please ca	ill:
Tania Varela	at (305) 984-2796 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departn	nent of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

TO: Amendment Section

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Flor on organized under the laws of the State or registered agent, or both, in the State	e of Florida
1. The name of t	the corporation: Tania Varela	a, P.A.	
2. The principal	office address: 1901 Brickel	I Avenue, Apt. B2005	
	Miami, FL 33		
3. The mailing a	ddress (if different): same as	above	
4. Date of incorp	poration/qualification: 7/13/20	Document number: P18	8000061048
	I street address of the current regittment of State: (If resigned, enter	istered agent and registered office on fi r resigned)	le with the
	Tania Varela		
	66 W. Flagler St., 6th F	loor	— ::: 13 — ::: 15
	Miami, FL 33129		——————————————————————————————————————
6. The name and (if changed):	i street address of the new registe	ered agent (if changed) and /or registere	AM III : 03
	Tania Varela		
	1901 Brickell Avenue, A	Apt. B2005	
		Box NOT acceptable	
	Miami, FL 33129		
The street address changed will	ess of its registered office and the be identical.	e street address of the business office	of its registered agent.
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by been notified in writing of the change.	y an officer so
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Tania Varela	
I hereby accept I further acree	to comply with the provisions of	Printed or typed name a sign and agree to act in this capacity. Call statutes relative to the proper and the and accept the obligation of my posty to reflect a change in the registered of this change.	complete
	nature of Registered Agent/	7/22/2019	
If signing on be	half of an entity:		
T	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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