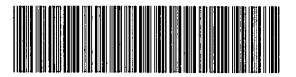
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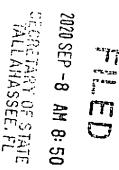
(Requestor's Name)
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COVER LETTER ' ' '

TO: Amendment Section Division of Corporations	•		•
SUBJECT: CASA CANO CORP Name of Corporation			_
DOCUMENT NUMBER: P20000037329			
The enclosed Statement of Change of Registered C	Office/Agent and fo	e are submitted fo	— r filing.
Please return all correspondence concerning this m	•		Č
Sergio Cano			
Name of Contact Person			
Sergio Cano			
Firm/Company			
14330 SW 175 St			
Address			
Miami . Florida 33177			
City/State and Zip Code	_		
cc@ramoscabrerainc.com			
E-mail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, ple	case call:		
Rosa Cabrera	at (⁹⁵⁴	7016940	
Name of Contact Person	at (⁹⁵⁴ Area C	ode & Daytime Te	lephone Number
Enclosed is a \$35.00 check made payable to the D	epartment of State.		
Mailing Address:	Street Addre	<u>ss:</u>	

Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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