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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: INTERHOME FURNITURES INC Name of Corporation		
Name of Corporation		
DOCUMENT NUMBER: P21000074985		
The enclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
J. David Pena, ESQ		
Name of Contact Person		
J. David Pena, PA		
Firm/Company		
201 Alhambra Cir		
Address		
Coral Gables, Florida 33134		
City/State and Zip Code		
dpena@pena.law		
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, pleas	e call:	
J. David Pena, Esq	at (305) 3506800	
Name of Contact Person	at (305) 3506800 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depa	artment of State.	
Mailing Address: Amendment Section	Street Address:	
	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
ranamasses, 1 D 52517	Tallahassee, FL 32303	

CR2E045 (04/13)

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: INTERHOME FURNITURES INC
2. The principal office address: 201 Alhambra Cir Suite 600, Coral Gables, FL 33134
3. The mailing address (if different): dpena@pena.law
4. Date of incorporation/qualification: 08/20/2021 Document number: P21000074985
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)
PAUL GATGENS
3490 WEST 92 PLACE
HIALEAH, FL 33018
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): J. DAVID PENA, ESQ.
2:5
201 ALHAMBRA CIRCLE, SUITE 600 P.O. Box NOT acceptable
CORAL GABLES, FL 33134
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, of the corporation has been notified in writing of the change.
Signature of an officer or director 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 Registered Agent Date
If signing on behalf of an entity:
J. David Pena Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314