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Office Use Only



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1 - 3 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 689151 4715037					
AUTHORIZATION THE RELEASE					
COST LIMIT : \$35.00					
ORDER DATE: April 20, 2023					
ORDER TIME : 9:15 AM					
ORDER NO. : 689151-060					
CUSTOMER NO: 4715037					
CHANGE OF AGENT					
NAME: YVETTE GARCIA, CPA, P.A.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker EXT#					
FYAMINED.					

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

statement of cha	provisions of sections 607.0502, 617.0 nge is submitted for a corporation org r to change its registered office or regi	anized under the laws of the	State of Florida
1. The name of t	he corporation: YVETTE GARCIA, CF	'A, P.A.	
2. The principal		·	10017
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 01/13/2022	Document number:	P22000005046
5. The name and	street address of the current registered treent of State: (If resigned, enter resigned,	d agent and registered office	
	GARCIA, YVETTE		
	3 GROVE ISLE DRIVE, APT 808		7.02
	COCONUT GROVE	FL 33133	2023 MAY
6. The name and (if changed):	street address of the new registered a	gent (if changed) and /or reg	ı
	Corporation Service Company		<u> </u>
	1201 Hays Street	100	
	Tallahassee	Box NOT acceptable FL 32301	l
The street addre	ss of its registered office and the stre	et address of the business of	office of its registered agent,
Such change wa	s authorized by resolution duly adop 6 board, or the corporation has been	ted by its board of directors notified in writing of the ch	s or by an officer so nange.
(Mario	Yvette Garcia	President
I hereby accept a I further agree to of my duties, and document is bein corporation has	the appointment as registered agent of comply with the provisions of all sides and accept the one filed merely to reflect a change in been notified in writing of this change in Service Company	• •	name and title vacity, r and complete performance registered agent. Or, if this ss, I hereby confirm that the
By: Drose 2	-Kuby	04/27/2023	
·	ature of Registered Agent	Do	ale .
	nalf of an entity:		
	Asst. Vice President		
• • • • • • • • • • • • • • • • • • • •		FEE: \$35.00 * • *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)