P22000013049

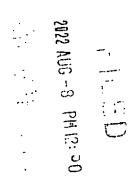
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COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Planejamento USA Immigration Law, P.A. Name of Corporation	<u></u>				
DOCUMENT NUMBER: P22000013049					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matt-	er to the following:				
	-				
Austin Kirtley					
Name of Contact Person					
Planejamento USA Immigration Law, P.A.					
Firm/Company					
6900 Tavistock Lakes Blvd., Stc. 400					
Address					
Orlando, FL 32827					
City/State and Zip Code					
atkirtley@gmail.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please	call:				
Austin Kirtley	at (850) 559-4555				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address:	Street Address:				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.050 unge is submitted for a corporation organ	nized under the laws of the State of .	Florida	
	er to change its registered office or regist the corporation: Planejamento USA Immig		-lorida.	
1. The name of	the corporation: 6900 Tayistock Lakes Blva	1 Ste 100		
Orlando, FL 328	office address: 6900 Tavistock Lakes Blve 27	J.C10		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 2/10/2022	Document number: P2200001	13049	
5. The name and Florida Depart	d street address of the current registered a rtment of State: (If resigned, enter resigne	agent and registered office on file wi	ith the	
	Austin Kirtley			
	Tavistock Lakes Blvd., Ste. 400		-	
	Orlando. FL 32827		2022 AU6	
6. The name and (if changed):	d street address of the new registered agei	nt (if changed) and /or registered of	AUG -8	ر معدد معدد عدسدر ع
	Rodolfo Abbondanza) ! : : :
	6900 Tavistock Lakes Blvd., Ste. 400		- T	
	P O. Box	x NOT acceptable	- , ç))
	Orlando, Fl. 32827		_	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of it	s registered ago	ent,
Such change wa authorized by th	as authorized by resolution duly adopted be board, or the corporation has been no	d by its board of directors or by an stiffed in writing of the change.	officer so	
Custi	Mutter or director	Austin Kirtley Pronted or typed name and to	ile	_
I hereby accept I further agree to of my duties, an docuntent is bein corporation has	the appointment as registered agent an to comply with the provisions of all stat d I im familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change.	d agree to act in this capacity. utes relative to the proper and com igation of my position as registered e registered office address, I hereb	iplete performa d agent. Or, if , by confirm that	nce this the
10)	WASTRAND	DRIANDO FL OF	104/20	2.2
Sig	duire of Registered Agent	Date		_
If signing on be	half of an entity:			
RODDLF				
T	yped or Printed Name			

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