## P23000081948

(Re	equestor's Name)
(Ad	ddress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE
	JAN 2 3 2024





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12/18/23--01031--011 \*\*35.00



## **COVER LETTER**

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TO: Amendment Section Division of Corporations	
SUBJECT: STEPS MIAMI BEHAVIOR ANALYSI Name of Corporation	IS, INC
DOCUMENT NUMBER: P23000081948	
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:
ERNESTO GOMEZ GONZALEZ	
Name of Contact Person	
STEPS MIAMI BEHAVIOR ANALYSIS, INC	
Firm/Company	
3901 NW 79TH AVE	
Address	<del></del>
DORAL, FLORIDA 33166	
City/State and Zip Code	
egomez@stepsmiami.com	
E-mail address: (to be used for future annual	report notification)
(	,
For further information concerning this matter, p	lease call:
ERNESTO GOMEZ GONZALEZ	2738285
Name of Contact Person	at (786 ) 2738285 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the I	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: STEPS MIAMI BEHAVIOR ANALYSIS, INC
	office address: 3901 NW 79TH AVE. SUITE#246DORAL, FL 33166
	address (if different):
4. Date of incoη	poration/qualification: 11/22/2023 Document number: P23000081948
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)  PAULA DE LA REGATA
	PAULA DE LA REGATA
	3901 NW 79TH AVE. SUITE#246DORAL, FL 33166
	(resigned)
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	ERNESTO GOMEZ GONZALEZ
	3901 NW 79TH AVE. SUITE#246DORAL, FL 33166
	P.O. Box NOT acceptable
	ess of its registered office and the street address of the business office of its registered agent be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, on the corporation has been notified in writing of the change.
	ERNESTO GOMEZ GONZALEZ
I hereby accept I further agree of my duties, an document is be	the appointment as registered agent and agree to act in this capacity.  It to comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speed of the proper and complete performance and the sequence of the proper and complete performance and the sequence of the proper and the proper and the proper and the performance and the proper and the proper and the performance and the proper and the proper and the performance and the proper and the proper and the performance and the proper and the proper and the performance and the proper a
	12/11/2023
Sig	nature of Kuntered Agent Date
If signing on be	chalf of an entity:
ERNESTO GON	MEZ GONZALEZ
7	yped or Printed Name

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