S	ст. 7345 SW 152 SS Міаниі, F7 33157 ace of Business	US 3. Mailing Address	15 JW 152 8 Ami, Fl 331	57. 57			
Suite, Apt. i City & State				-	INNIAME IN SUJO MARY RUIT DOEL MOLT B	linn solns tints Nation (	<b></b>
City & State	ł, etc.						
·		Suite, Apt. #, etc.			DO NOT WRITE IN T	HIS SPACE	
Zip		City & State		4. FEI	Number 65-0405125		pplied For ot Applicable
	Country	Zip	Country	5. Cer	tificate of Status Desired	¢9.75 Ad	Iditional
	6. Name and Address of Current	t Registered Agent	Name	7. Nar	ne and Address of New Registe	red Agent	
DEL SOL, ISAIAS 1355 NW 93RD CT 7345 SW 150 St. STE A102- MIANUR, FI 331.57 MIANUR, FI 331.57			Street Addre	ss (P.O. Box	Number is Not Acceptable)		
	NW 93RD CT 7345 SU	El 22157				<u>.                                    </u>	<u></u>
	HFL 33173_ M(aun)		City	<u> </u>		FL Zip Coo	je
3. The above	named entity submits this statement for	or the purpose of changing its r	egistered office or reg	stered agent	<u> </u>		
SIGNATURE _	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered Agent signature rec	uired when reinst	ating) D	ATE	
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)	-	! FEE IS \$150.00 10 Fee will be \$550. e to Department of	00	10. Election Campaign Financing Trust Fund Contribution.		DO May Be d to Fees
11.	OFFICERS AND		12.	ADDI	TIONS/CHANGES TO OFFICERS		
nitle Name	PD DEL SOL, ISAIAS	Delete	TITLE NAME			Change []	Addition
STREET ADDRESS	DEL SOL, ISAIAS 1355 NW 93RD A 102 734 MIAMI FL 33/57	5 700 150-01	STREET ADDRESS CITY-ST-ZIP				
TTLE	VD	Delete	TITLE		<u></u>	Change	Addition
VAME STREET ADDRESS CITY - ST - ZIP	ROJAS, EDWARD 1 <del>355 NW 93RD CT A10</del> 2 <i>73</i> MIAMI FL <b>33</b> /57	45 SW 152 St.	NAME STREET ADDRESS CITY-ST-ZIP				
IITLE	ST ST	Delete	TITLE			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	DEL SOL, CLARA 1355 NW 93 CI. 7345 : MIAMI FL 33/57	500 150 St	STREET ADDRESS	يبيدون المي	·		
TITLE VAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			Change	Addition
TITLE VAME STREET ADDRESS CITY-ST-21P		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	····	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_		Change	Addition
<ol> <li>I hereby c indicated of the corr</li> </ol>	ertify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emp or on an attachment with an address,	is true and accurate and that m powered to execute this report a	the exemption stated i	the same lon	al effect as if made under oath. It	hat Lam an office	r or director

<u>21a</u>