P93000048903

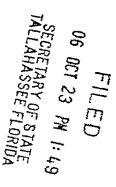
(Req	uestor's Name)	
(Addi	ress)	
(Add	ress)	
(City/	State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
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(Doct	ument Number)	
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: The South Tech Group Architectural Desi (Name of Corporation)	gn Co			
DOCUMENT NUMBER: P93000048903				
The enclosed Statement of Change of Registered Office/Agent and	fee are submitted for filing			
Please return all correspondence concerning this matter to the follo	owing:			
Nora Diaz				
(Name of Contact Person)				
The South Tech Group Architectural Design Co				
(Firm/Company)				
9015 NE 10TH AVE				
(Address)				
Miami FI 33138				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Nora Diaz at (305 (Name of Contact Person) (Are	3 416-7524 a Code & Daytime Telephone Number)			
(Name of Contact Felson) (Are	a 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			
	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

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

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statement of cha	provisions of sections 607.0502, 617.0502, unge is submitted for a corporation organiz er to change its registered office or registere	ed under the laws of the State of Fl	orida
1. The name of	the corporation; The South Tech Group A	rchitectural Design Co.	<u> </u>
	office address: 2520 South Dixie Hwy - Co		· · · · · · · · · · · · · · · · · · ·
3. The mailing a	address (if different): 9015 NE 10TH AVE	Miami Fl 33133	, ,
4. Date of incor	poration/qualification: 07/13/1993	Document number: P9300004	8903
	d street address of the current registered age rtment of State:	ent and registered office on file with	the
	Pozo, Zaedy R		
	2655 Le Jeune Rd - Penthouse	ID	06 TAL
	Coral Gables Fl 33134	7.250	EC 28 F
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered offic	TARY OF
	Mario A Puig		LOF TEST
	2520 South Dixie Hwy - Coconu	t Grove FI 33133	ADA 4018
	(P.O. Box NOT acceptable)		
The street addr	ress of its registered office and the street a	address of the business office of its	registered agent,
Such change wanthorized by	vas authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an of itied in writing of the change.	officer so
Asygna	ture of an officer or director)	Giorgio Bibolini (Printed of typed name and th	ile)
I hereby accep I further agree of my duties, a document is be corporation ht	t the appointment as registered agent and to chirply with the provisions of all statud last familiar with and accept the obling fit d merely to reflect a change in the as been notified in writing of this change.	l agree to act in this capacity. ites relative to the proper and com gation of my position as registered registered office address, I hereby	plete performance agent. Or, if this v confirm that the
		Mario A Puig October ,200	06
-	ignature di Registered Agent)	(Date)	
it signing on b	ehalf of an entity:		
	(Typed or Printed Name)	·	

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