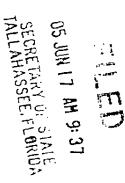
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: <u>Societe Civile of Florida unc.</u> (Name of corporation)
DOCUMENT NUMBER: P 940 000 78/12
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:
Jean Piesse DECOCK (Name of contact person)
Societe Civile of Floring inc (Firm/Company)
2501 BRICKELL Ave #303 (Address)
MIAM: FL 33129 (City/state and zip code)
For further information concerning this matter, please call:
Jean Pierre DECOCK at (786) 1874/42  (Name of contact person) (Area code & daytime telephone number)
Englosed is a \$25.00 sheet made payable to the Department of State

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Societe Civile of Floris 4 inc
2. The principal office address: 4240 GALT OCEAN DRIVE # 9205
FORT LAUDERDALE A33308
3. The mailing address (if different):
4. Date of incorporation/qualification: OCT. 25 1394 Document number: P94000 78 112
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
2501 Brickell Ave. # 909 For & MiAmi FL-33129
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
4240 GALT OCEAN DR. # 2205 FORT LAUDER DALE FL 33308 (P.O. BOX NOT acceptable)
FORT LAUDER DALE FL 33308 (P.O. Box NOT acceptable)
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director)  (Printed of typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) 0.6 / 14 / 0.5
If signing on behalf of an entity:
(Typed or Printed Name)

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