

P94000089572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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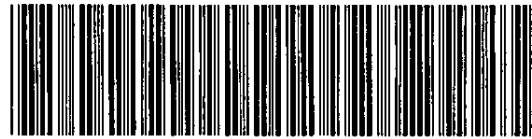
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

08/26/13--01029--010 **35.00

C. LEWIS
SEP 3 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AVRAM CORPORATION

Name of Corporation

DOCUMENT NUMBER: P94000089572

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:

HERBERT J. COLEMAN

Name of Contact Person

AVRAM CORPORATION

Firm/Company

555 NE 34TH STREE, SUITE 1701

Address

MIAMI, FLORIDA 33137

City/State and Zip Code

hc@avramcorporation.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HERBERT J. COLEMAN

305 576-3777

at ()

Name of Contact Person

Area Code & Daytime Telephone Number

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: AVRAM CORPORATION
2. The principal office address: 555 NE 34TH STREET, SUITE 1701
MIAMI, FLORIDA 33137
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/12/1994 Document number: P94000089572

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

HERBERT J. COLEMAN

555 NE 34th STREET, SUITE 1701

MIAMI, FLORIDA 33137

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

555 NE 34TH ST, STE 1701 - MIAMI, FL 33137

AND

P.O. Box NOT acceptable

4770 BISCAYNE BLVD, STE 630, MIAMI, FL 33137

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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.

Herbert J. Coleman
Signature of an officer or director

Herbert J. Coleman

Printed or 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.

Herbert J. Coleman
Signature of Registered Agent

21 August 2013

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314