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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hilda M. Porro, P. A. Name of Corporation
DOCUMENT NUMBER: P 9500000 7472
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:
Hilda M. Porro Name of Contact Person
Hilda M. Porro, P.A. Firm/Company
12012 South Shore Blud. Sta. 208
Wellington, Ft 33414 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hilda M. Poro at (501) 798.3994 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

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organiz in order to change its registered office or register	red under the laws of the State of Florida
1. The name of the corporation: Hilda I	
2. The principal office address: 12012 5	outh Shore Bluck, Ste. 20 N, FL 33414
3. The mailing address (if different):	•
4. Date of incorporation/qualification:/25/194	35_ Document number: <u> </u>
5. The name and street address of the current registered age Florida Department of State: (If resigned, enter resigned	•
Hilda M. Par	70
	rest Hill Blud. Sk. 122
Wellington,	FZ 33414
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office
Hilda M.	Proc 1 may 2017
12012 South 51 P.O. Box NOT as	hore Blud., 5k. 208.
Wellington, FL	
The street address of its registered office and the street as changed will be identical.	
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been noti	
Signature of an officer or director	Printed or typed name and title
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut performance of my duties, and I am familiar with and accagent. Or, if this document is being filed merely to reflect hereby confirm that the corporation has been notified in	agree to act in this capacity. es relative to the proper und complete cept the obligation of my position as registered
Scanding of Basicard Asset	8/4/2014
Signature of Registered Agent If signing on behalf of an entity:	- Date
Typed or Printed Name	

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