

P95000051245

Requestor's Name	
Address	
City/State/Zip	Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

100003236671--7  
-05/03/00--01003--009  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 APR 28 PM 12:54

R.A. Charge

Examiner's Initials

LFJ



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

April 19, 2000

65-45 MIRACLE MILE, INC.  
107 MILL PLAIN RD., SUITE 305  
DANBURY, CT 06811

SUBJECT: 65-45 MIRACLE MILE, INC.  
Ref. Number: P95000051245

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file your document is \$35.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain  
Corporate Specialist

Letter Number: 300A00021531

RECEIVED  
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DIVISION OF CORPORATIONS

**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,  
the undersigned corporation organized under the laws of the State of Florida  
submits the following statement in order to change its registered office or registered agent, or both, in  
the State of Florida.

1. The name of the corporation is: 65-45 Miracle Mile, Inc.
2. The mailing address of the corporation is: 107 Mill Plain Road, Suite 305  
Danbury, CT 06811
3. Date of incorporation/qualification: 6/30/95 Document number: P95000051245
4. The name and address of the current registered agent and office:

A Z Registered Agent Corporation

2601 S. Bayshore Drive, Suite 1600

Miami, Florida 33133

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Joel Hirschhorn, Esq.

Douglas Centre, PH-1, 2600 Douglas Road

Coral Gables, Florida 33134-6134

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.

[Signature]  
(Signature of an officer, chairman or vice chairman of the board)

3-30-2000  
(Date)

BRIAN S. FIELDING, PRESIDENT  
(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated corporation, 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.*

By: [Signature]  
(Signature of Registered Agent)

3/31/00  
(Date)

If signing on behalf of an entity:

Joel Hirschhorn  
(Typed or Printed Name)

(Capacity)

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

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