## P97000043361

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

## FAROD CORPORATION

Name of Corporation

P9700043361

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:

Magda Farah	
Name of Contact Person	
Farod Corporation	
Firm/Company	
1400 Salzedo ST. #402	
Address	
Coral Gables, FL 33134	
City/State and Zip Code	
magda@farod.com	

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

For further information concerning this matter, please call:

Magda Farah <u>at</u> (305 ) 710-4702

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

MIN SEP 13 MILLIA

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

	•	517.0502, 607.1508, or 617.1508, Florida Statutes, this a organized under the laws of the State of <mark>Florida</mark>
	=	registered agent, or both, in the State of Florida.
1. The name of	the corporation: Farod Corpo	ration
2. The principa	d office address: 1400 Salzed	lo St #402, Coral Gables, FL 33134
3. The mailing	address (if different): same	<del></del>
4. Date of inco	rporation/qualification:	Document number: P97000043361
5. The name ar		stered agent and registered office on file with the
	Blanca Rodriguez	(RESIGNED)
	1400 Salzedo ST, #402	
	Coral Gables, FL 33134	4 EP 2
6. The name ar (if changed):	•	ed agent (if changed) and /or registered office
	Magda Farah	
	1400 Salzedo St, #402	
	Coral Gables, FL 3313	30x NOT acceptable
The street addras changed wil		street address of the business office of its registered agent,
Such change wanthorized by	as authorized by resolution duly a the board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.
Signat	une of an officer or director	MAGBA FAMALA 9/10/12 Printed or typed name and title
I hereby accep I further agree performance o agent. Or, if ti hereby confirn	It the appointment as registered age to comply with the provisions of a f my duties, and I am familiar with his document is being filed merely I that the corporation has been no	gent and agree to act in this capacity. all statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I tified in writing of this change.
	Minne	9/10/18
	gnature of Registered Agent	Date
If signing on b	ehalf of an entity:	
	Typed or Printed Name	

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