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	(Requestor's Name)			
(Address)				
	(1001033)			
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	(O. 10) 1 ET 10			
	(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
	(Business Entity Name)			
	(Document Number)			
	(
Certified Copies	_ Certificates of St	atus		
	<u> </u>			
Special Instructions to	Filing Officer:			
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Office Use Only



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JULƏQ 2024 A RAMSEY CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 542649 7342469					
AUTHORIZATION: STEED BLOOM					
COST LIMIT : \$ 35					
ORDER DATE : July 9, 2024					
ORDER TIME : 1:0 PM					
ORDER NO. : 542649-002					
CUSTOMER NO: 7342469					
CHANGE OF AGENT					
NAME. CADIOC I DODDICHEZ INC					
NAME: CARLOS J. RODRIGUEZ, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Shauna Godbolt EXT#					

EXAMINER:

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

statement of cha	nge is submitted for a corporatio	517.0502, 607.1508, or 617.1508, Flor n organized under the laws of the State r registered agent, or both, in the State	of FL .	
1. The name of t	the corporation: CARLOS J. ROD	RIGUEZ, INC.		
		CIRCLE SUITE 760 CORAL GABLES	5, FL 33134	
3. The mailing a	address (if different):			
		Document number: P98		
	I street address of the current regirtment of State: (If resigned, enter	stered agent and registered office on fil resigned)	le with the	
	Rodriguez, Carlos J			
	255 ALHAMBRA CIRCLE SUIT	TE 760	le with the	
	CORAL GABLES	FL 33134	*** P	
6. The name and (if changed):	I street address of the new register	red agent (if changed) and /or registere	d office	
	Corporation Service Company			
	1201 Hays Street			
		P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office	of its registered agent.	
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has b	adopted by its board of directors or by been notified in writing of the change.	y an officer so	
/s/ Carlos J. Rodriguez		Carlos J. Rodriguez	President	
_	re of an officer or director	Printed or typed name		
I further agree wo of my duties, an document is bei corporation has	the appointment as registered a to comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chang s been notified in writing of this o n Service Company	gent and agree to act in this capacity, all statutes relative to the proper and the obligation of my position as regisge in the registered office address, I he hange.	complete performance tered agent. Or, if this ereby confirm that the	
By: ∑in		07/08/2024		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
GRACE E. KIRE	BY, ASST. VICE PRESIDENT			
T-	vped 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
CR2E045 (04/13)