P9800098711

(Requestor's Name)				
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE TALLAHASSEE, FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: REDECOMSA, INC (Name of Corporation)
DOCUMENT NUMBER: P98000098701
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:
MIRIAM DE TORO
(Name of Contact Person)
MIRIAM DE TORO CPA
(Firm/Company)
231 ALTARA AVE (Address) CORAL GABLES, FL 33146 (City/State and Zip Code) For further information concerning this matter, please call:
(Address)
CORAL GABLES, FL 33146
(City/State and Zip Code)
For further information concerning this matter, please call:
MIRIAM DE TORO at (305) 448-1648 (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

statement of char	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of I	FLORIDA
		•	··ioriaa.
	ne corporation: REDECOMSA, IN		
2. The principal of	office address: 17011 S.W. 51 C		,
	MIRAMAR, FL		
3. The mailing ac	Idress (if different): 231 ALTARA	AVENUE	
	CORAL GAB	LES, FL 33146	
4. Date of incorp	oration/qualification: 01/20/1998	B Document number: P98000	098701
5. The name and Florida Depart		ered agent and registered office on file wi	ith the
	SANTANA, MARTI	IN A	
	10740 N.W. 16TH	COURT	_
	PLANTATION, FL		- = = 0.
	PLANTATION, FL	33322	- E
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered of	O7 JUL 23 AH II: 10 SECRETARY OF STATE TALLAHASSEE. FLORI
	17011 S.W. 51 CC	DURT	II: I
(P.O. Box NOT acceptable)			- 86
	MIRAMAR, FL 330	027	_
	Si .	street address of the business office of i	
Such change was authorized by the	s authorized by resolution duly a e board or the corporation has be	dopted by its board of directors or by ar een notified in writing of the change.	officer so
	e of an officer of director)	MARTIN A SANTANA (Printed or typed name and	t.4(=)
I further agree to of my duties, and document is bein	the annointment as registered as	ent and agree to act in this capacity Ill statutes relative to the proper and cor he obligation of my position as registere e in the registered office address. I here	,
(Sign	nature of Registered Agent)	(Date)	
If signing on beh	nalf of an entity:		
(Т)	/ped or Printed Name)		

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