

PG 8000-106112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

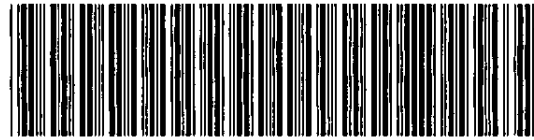
(Business Entity Name)

(Document Number)

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OCT 17 2016
T. LEMMONY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 325 Alcazar Holding Corp.

Name of Corporation

DOCUMENT NUMBER: P98000106112

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:

Mario J. Garcia, CPA

Name of Contact Person

Mario J. Garcia, CPA

Firm/Company

7700 Camino Real, Suite D-411

Address

Miami, Florida 33143

City/State and Zip Code

Miamimario@aol.com

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

For further information concerning this matter, please call:

Mario J. Garcia, CPA

Name of Contact Person

at (**305**) **389-7616**

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, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 325 Alcazar Holding Corp.
2. The principal office address: 9100 South Dadeland Boulevard, Suite 600
Miami, Florida 33156
3. The mailing address (if different): Same as above.

4. Date of incorporation/qualification: 12-22-1998 Document number: P98000106112

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Murai, Wald, Biondo & Moreno, P.A.
1200 Ponce de Leon Boulevard
Miami, Florida 33134

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Same as above.

P.O. Box NOT acceptable

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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, or the corporation has been notified in writing of the change.

Signature of an officer or director

Agustin R. Arellano
Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

X

Date

If signing on behalf of an entity:
Agustin R. Arellano

Typed or Printed Name

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