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(Add	ress)	
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(City/	State/Zip/Phone	#)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: South Grach REAL Estate SERVICES, INC.
(Name of corporation)
DOCUMENT NUMBER: P990000 500 51
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:
Victoria c. FEDERICI
Victoria c. FEDERICI (Name of person)
south beach Real Estate services, inc.
(Name of firm/company)
407 LINCOLN ROAD, SUPE 2D (Address)
(Address)
MIAMI GEAM, FL. 33139
(City/state and zip code)
For further information concerning this matter, please call:
VICHRIA FEDERICI at (305) 772-6992 (Name of person) (Area code & daytime telephone number)
(rathe or person) (rather code to diffine witchnose manner)
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 409 E. Gaines Street Tallahassee, FL 32399
Tallahassee, FL 32314 Tallahassee, FL 32399

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

	provisions of sections for change is submitted	l for a corporatio	n organized	l under the lo	iws of the S	state of	•
of Florida.	in order to ch	ange its register	ed office or	registered a	gent, or bo	oth, in the	State
•	the corporation:	with Stach REA	el estate	Stevices.	INC.		
		of their		Shite.	20		
Milans &	5644, FL. 3313'	1		_			
3. The mailing a	address (if different):						
4. Date of incor	poration/qualification	: 1/3/99	D	ocument nur	nber: <u>P99</u>	0000 50	051
	d street address of the rtment of State:	e current registere	ed agent and	l registered o	office on fil	e with the	
	Raphe	L Mems					
	4000 1	Herohines Pla	ce, 100	S.E. 244	54		
	Miemi ,	FL . 3313).	- 9101				
6. The name ar changed):		the new registers IN FEDERICI NULLY ROAD			nd /or regi	stered offi	ce (if
		86014 , FL. O. Box or personal mail	-	able)		•	
The street addreagent, as change	ess of its registered of ed will be identical.	office and the str	eet address	of the busin	ess office o	of its regis	tered
Such change was authorized by the	as authorized by resone board, or the corp	olution duly adop oration has been	oted by its b notified in	oard of dire writing of th	ctors or by ne change.	an officer	:so
New-	, chairman or vice chairman c	If the board	√l <i>çh</i>	THE TENER	Me and title)		
I hereby accept I further agree performance of registered agen	the appointment as to comply with the prompty with the prompty duties, and I am to Or, if this docum I hereby confirm that	registered agent provisions of all s familiar with ar ent is being filed	t and agree statutes rela nd accept the merely to t	to act in this itive to the p se obligation reflect a char	s capacity. roper and of my posinge in the i	ition as registered is change	
m			3/08	103		TAL AL	ည္အ
If signing on beha	Signature of Registered Agent If of an entity:	,		(Date)		U2 #	
	Typed or Printed Name)			(Capac	ity)	SEF 0	5 F
		* * FILING FE				T'S	
		ABLE TO FLORIDA DEI PORATIONS, P.O. BOX				VIII.	ည် သုံ