## P990000 90354

(Re	equestor's Name)			
(Ac	ddress)			
(Ad	ddress)			
(C	ity/State/Zip/Phone #	<del>f)</del>		
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name	<del>)</del>		
(Document Number)				
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

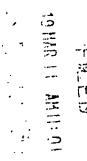
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## COVER LETTER .

TO: Amendment Section Division of Corporations				
SUBJECT: CORTLAND COMMERCIAL CENTER CORPORATION  Name of Corporation				
Name of Corporation				
DOCUMENT NUMBER: P99000090354				
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:				
CARLOS M . SOLARES				
Name of Contact Person				
CORTLAND COMMERCIAL CENTER CORPORATION				
Firm/Company				
12780 SW 122 AVE , STE # 200				
Address				
MIAMI FLORIDA 33186				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
CARLOS M . SOLARES at ( 305 ) 253-0650				
CARLOS M . SOLARES at (305) 253-0650  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				

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

	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org		
	er to change its registered office or regi		
1. The name of	the corporation: CORTLAND COMM	ERCIAL CENTER CORPORATI	ION
	office address: 12780 SW 122 A	VE ,STE # 200	
	MIAMI FLORIDA	33186	
3. The mailing a	address (if different): SAME		
4. Date of incorp	poration/qualification: 10/13/1999	Document number: P99	9000090354
5. The name and Florida Depar	l street address of the current registered tment of State: (If resigned, enter resign	agent and registered office on fil	e with the
	BLUM SAMUEL S, ESQ		
	2666 TIGERTAIL AVEN	UE ,STE # 106	
	COCONUT GROVE , FLO	RIDA 33133	
6. The name and (if changed):	street address of the new registered ag	ent (if changed) and /or registered	l office
	CARLOS M. SOLARES	<del>_</del> ,	
	12780 SW 122 AVE ,		
	MIAMI FLORIDA 3318	•	
The street address as changed will l	ess of its registered office and the street oe identical.	t address of the business office o	f its registered agent.
	s authorized by resolution duly adopte e board, o <del>r the</del> corporation has been no		
Signature	of an officer or director	CAUOS SOLARS - Printed or typed name and	Mesopra Hitle
performance of nagent. Or, if this	he appointment as registered agent an o comply with the provisions of all stat my duties, and I am familiar with and a document is being filed merely to refi hat the co <del>rpor</del> ation has been notified i	tutes relative to the proper and co accept the obligation of my positi lect a change in the registered of	omplete ion as registered Jice address, I
		3/7/19	
If signing on beh	alf of an entity:	Date	
	MMERCIAL CENTER CORPORATION	4	
	ed or Printed Name		

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