

PA900095620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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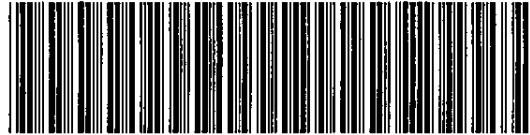
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Del Valle International, Inc
Name of Corporation

P99000095620
DOCUMENT NUMBER:

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:

Aurora L. Alvarez
Name of Contact Person
Del Valle International, Inc
Firm/Company
9270 SW 15 Street
Address
Miami FL 33174
City/State and Zip Code
investment@delvalle-international.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aurora L. Alvarez 305- 904-2231
Name of Contact Person at () 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: Del Valle International, Inc
2. The principal office address: 2000 Ponce de Leon Blvd Suite # 600
Coral Gables, FI 33134
3. The mailing address (if different): _____

4. Date of incorporation/qualification: January 4, 2016 Document number: 65-0958369

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)

2901 SW 8 Street Suite # 201 Miami FI 33135

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

2000 Ponce de Leon Suite # 600


Coral Gables, FI 33134

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

Aurora L. Alvarez

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

January 04, 2016

Date

If signing on behalf of an entity:

Aurora L Alvarez

Typed 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