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## **COVER LETTER**

Division of Corporations	**	••
SUBJECT: JUVIS REAL ESTATE II	· · · · · · · · · · · · · · · · · · ·	
(N	ame of Alien Business Organization)	
Dear Sir or Madam:		
The enclosed Designation of Registered are submitted for filing.	Agent and Registered Office for Alien Business Orga	unization and fee(s)
Please return all correspondence concer	ning this matter to the following:	
GEORGE R. MORAITIS, JR., ES	QUIRE	
(Name of Person)		
MORAITIS, COFAR, KARNEY &	MORAITIS	
(Firm/Company)		
915 MIDDLE RIVER DRIVE, SUITE	<u>506</u>	
(Address)		
FORT LAUDERDALE, FLORIDA 333	04	
(City/State and Zip Coo	le)	
For further information concerning this	matter, please call:	
CATHERINE MIETHE	_ at (_954 563-4163	
(Name of Person)	(Area Code & Daytime Telephone Number)	ALLO
STREET/COURIER ADDRESS:	MAILING ADDRESS:	温品のユ
Registration Section	Registration Section	SS 5
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	PO R M
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following a	mount:	©/5 <b>- ₹</b> 37
<b>✓</b> \$35.00 Filing Fee	\$43.75 Filing Fee & Certified Cop	уу

## DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. JUVIS REAL ESTATE INVESTMENTS CORP		
(Name of alien b	ousiness organization)	
2. PANAMA	3. 98-1142447	
(State or country under which entity is organized)	(FEI Number, if applicable)	
4, 1800 S. Ocean Blvd., Suite 711, Pompano Beach,	Florida 33062	
(Principal	office address)	
5. Name and Florida Street address of registered agent.		
GEORGE R. MORAITIS, JF	R., ESQUIRE	
915 MIDDLE RIVER DRIVE	SUITE 506	
FORT LAUDERDALE, FLO	PRIDA 33304	
6. The street address of the registered office and the street are identical.	et address of the business office of the registered agent	
MADO COM		
(Signature of chairman	, vice chairman, or officer)	
8. MARIA ISABEL VILLEGAS/DIRECTOR		
(Name and capacity of pers	son signing in number 7 above)	
9. Signature of registered agent:		
I hereby accept the appointment as registered agent. 607.0505, Florida Statutes.	I am familiar with and accept the obligations of section	
_	en e	
	(2/13/13 \$co ==	
(Registered agent accepting appointment)	(Date)	77
THE EXING OF THIS ALIEN BUSINESS OF DEPARTMENT OF STATE DOES NOT AUTHORIZED TRANSACT BUSINESS IN THE STATE OF FLOR	ORGANIZATION FORM WITH THE FLORIDA ORIZE THE ABOVE REFERENCED ENTITY TO IDA.	
FILING	G FEE \$35	O
Make checks payable to Flori	da Department of State and mail to:	

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314