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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: MY FIRST PLACE INC. Name of Corporation

## DOCUMENT NUMBER: S74547

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:

Jorge R. Figueredo Name of Contact Person MY FIRST PLACE INC. Firm/Company 16782 SW 88TH STREET #392 Address Miami, FL 33196

City/State and Zip Code

l

Figuerodomd@gmail.com

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

For further information concerning this matter, please call:

 Jorge R. Figueredo
 at (305)
 271-6633

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing-Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045(04/13)

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

1. The name of t	he corporation: MY FIRST PLACE INC.			
2. The principal	office address: 9450 Sunset Drive, Miami, FL 33173			
	ddress (if different):			
4. Date of incorp	poration/qualification: 06/07/2016 Document number: 574547			
5. The name and Florida Depart	street address of the current registered agent and registered office on file wit tment of State: (If resigned, enter resigned)	h the		
	Jorge R Figueredo			
	13876 SW 56 STREET SUITE 159			
	Miami, FL 33175	ŝ	207	
<ol> <li>The name and (if changed);</li> </ol>	street address of the new registered agent (if changed) and /or registered offi		2024 DEC -4	•
	Jorne R Higuerodo	ASSE		i
	16782 SW 88TH STREET #392		PH 6: 07	i
	P.O. Box/NOT accertable		0	
	Miami, FL 33196	147		

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

Michelle Angelis Figueredo

Printed of typed name and title

Date

I hereinv 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. Thereby confirm that the corporation has been nutified in writing of this change.

Signature of Registered Agent

November 25, 2024

If signing on behalf of an entity:

Jorge R Figueredo

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 (R2E045 (04/13)