Address Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) ☐ Certified Copy ☐ Walk in Pick up time Certificate of Status Photocopy Mail out Will wait AMENDMENTS ---NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name

Limited Partnership

Reinstatement

Trademark

Other

Examiner's Initials

Name Reservation

Florida Department of State, Sandra B. Mortham, Secretary of State

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	7.1508, Florida Statutes, the
undersigned corporation organized under the laws of the State of Hows submits the following statement in order to change its registered office or reg State of Florida.	istered agent, or both, in the
1. The name of the corporation is: Julaces Tx.	
1. The hank of the corporation is.	, 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.
2. The mailing address of the corporation is: 255 EDST FCAGLEX ST	- Suite 300. Hisri A:
3. Date of incorporation/qualification: 5/13/92 Document number 1	mber: <u>V36373</u>
4. The name and address of the current registered agent and office:	0
Albert M. Clarayoute	A SEC M
200 N. Hebiscus Drive	R 22
MIDMI BUSCL Fl30149	337
5. The name and address of the new registered agent and office: (P. O. Box No.	ot Acceptable)
FATIMA TEBBI. CIBRATION	ot Acceptable)
255 EAST FLAGLEZ ST,	SULVE 300
MIDMI. FR 33131	
The street address of its registered office and the street address of the busin agent, as changed, will be identical.	ness office of its registered
Such change was authorized by resolution duly adopted by its board of dirauthorized by the board.	ectors or by an officer so
(Signature of an officer, chairman or vice chairman of the board)	(Date)
	Stra 198
(Printed or typed name and title)	(Date)
Having been named as registered agent and to accept service of process f corporation, I hereby accept the appointment as registered agent and agr I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation	ee to act in ints capacity. proper and complete
registered agent.	Salara.
fatima kiljar flaramunke (Signature of Registered Agent)	(Date)/
If signing on behalf of an entity:	5± :
TATMA TEBAI. CLANATIONE	(Capacity)
CR2E045(4/95)	FILING FEE: \$35.00

CR2E045(4/95)