# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL PIERCE

Electronic Signature of Signing Officer/Director Detail

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Electronic Signature of Registered Agent

SIGNATURE:

| Officer/Director Detail : |                      |                 |                      |
|---------------------------|----------------------|-----------------|----------------------|
| Title                     | D                    | Title           | D                    |
| Name                      | PIERCE, MICHAEL      | Name            | ALLEN, D D           |
| Address                   | 2378 PRAIRIE AVENUE  | Address         | 2378 PRAIRIE AVENUE  |
| City-State-Zip:           | MIAMI BEACH FL 33140 | City-State-Zip: | MIAMI BEACH FL 33140 |

#### 2378 PRAIRIE AVENUE MIAMI BEACH. FL 33140

Entity Name: PIERCE ALLEN SOUTH, INC.

**Current Principal Place of Business:** 

### **Current Mailing Address:**

DOCUMENT# V06111

80 EIGHTH AVE SUITE 1602 NY. NY 10011

### FEI Number: 65-0310949

## Name and Address of Current Registered Agent:

PIERCE, MICHAEL 2378 PRAIRIE AVENUE MIAMI BEACH, FL 33140 US

### FILED Mar 31, 2016 Secretary of State CC6185555341

Certificate of Status Desired: Yes

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03/31/2016

Date

Date

PRESIDENT