F13000002900

(Requestor's Name)		
(Address)		
(, , ,		
(Address)		
(0)	- JOSES IT IT IT IT IS	
(Ci	ty/State/Zip/Phone	e #)
_	_	_
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
(, , , , , , , , , , , , , , , , , , , ,	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
		:
•		

Office Use Only



500250304825

08/05/13--01024---008 **35.00

13 和16-5 和 8: 18

ROCH 8 10 8.9.13

COVER LETTER

Division of Corporations
SUBJECT: Name of Corporation
DOCUMENT NUMBER: 713000002906
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:
Name of Contact Person Firm/Company
Po Sallaces
City-state and Zip Code) UC 27959
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (252) 75-1500 Area Code & Daytime Telephone Number
Plante of Contact Person 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

TO:

Amendment Section

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 Cacolina in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 2. The principal office address: 3. The mailing address (if different) s age 4. Date of incorporation/qualification: 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) 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): P.O. Box NOT acceptable 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 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 no duties, and I am familiar with and accept the obligation of no 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 If signing on behalf of an entity:

* * * FILING FEE: \$35.00 * * *

Typed or Printed Name