## P06000102037

(Requestor's Name)		
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PICK-UP	<b></b> WAIT	MAIL
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(Business Entity Name)		
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(Document Number)		
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Special Instructions to Fi	iling Officer:	

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: CAS	(Name of C	orporation)	
DOCUMENT NU	MBER: P06000102037		
		e/Agent and fee are submitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
		A. CASTILLO	
	(Name of Co	ntact Person)	
CASTY AIR CONDITIONING SERVICES, INC			
	(Firm/Co	ompany)	
	20824 SW 125TH AVE RD		
	(Add	ress)	
_	MIAMI, FLO		
For further informa	tion concerning this matter, please of	•	
roi iuiuici mioriia	tion concerning and matter, presse c	·CAII·	
CARLOS A. CAST		at ( 786 ) 262-0337	
(Na	me of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a \$35.0	0 check made payable to the Depart	ment 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

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

statement of cha	nge is submitted for a corporation organiz	607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of FLORIDA	
<del></del>	r to change its registered office or register		
1. The name of t	he corporation: CASTY AIR CONDITIONI	NG SERVICES, INC	
2. The principal	office address: 20824 SW 125TH RD, MIA	MI, FLORIDA 33177	
3. The mailing a	ddress (if different): N/A		
4. Date of incorp	poration/qualification: 10-19-2006	Document number: P06000102037	
	street address of the current registered age tment of State:	ent and registered office on file with the	
	ARMANDO A. PEREZ		
	5391 W 20TH AVE, HIALEAH, F	LORIDA 33012  LORIDA 33012  LAHASS	
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	
	CARLOS A. CASTI	TO	
	20824 SW 125TH AVE RD MIAMI, FLORIDA 33177  (P.O. Box. NOT acceptable)		
The street addre	ess of its registered office and the street as be identical.	ddress of the business office of its registered agent,	
Such change was authorized by the	is authorized by resolution duly adopted board, or the corporation has been noti	by its board of directors or by an officer so fied in writing of the change.	
	re of an office, of the life	CARLOS A. CASTILLO VP	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and o comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
K	atillo 2	01/09/2007	
	mature of Registrated Agent	(Date)	
If signing on be	half of an entity:		
Carle	yped or Printed Name)		
( )	There are remove remove.		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)