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COVER LETTER

TO:

Amendment Section Division of Corporations

DOCUMENT NUMBER:

SUBJECT:	Ocasio	Transport	Inc
~			

Name of Corporation

P13000068502

THE POST OF THE PER 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:

Alberto Ocasio

Name of Contact Person

Ocasio Transport Inc

Firm/Company

2822 Boating Blvd

Address

Kissimmee FI 34746

City/State and Zip Code

Ocasiotransport1@outlook.com

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

For further information concerning this matter, please call:

Alberto Ocasio

Name of Contact Person

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

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

statement of cha	provisions of sections 607,0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida.
i. The name of	the corporation: Ocasio Transport Inc office address: 1605 Perkins Rd Orlando Fl 32809
	office address.
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 8/14/13 Document number: P13000068502
	d street address of the current registered agent and registered office on file with the trent of State: (If resigned, enter resigned)
	Jose Ocasio
	1605 Perkins RD Orlando FL 32809
	Resigned
6. The name and (if changed):	Alberto Ocasio
	Alberto Ocasio
	2822 Boating Blvd Kissimmee FI 34746
	P.O. Box NOT aeceptable
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Signatu	Printed or typed name and title
l further agrée (verformance of	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	11/20/14
	half of an entity:
T	ped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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