

P17 0000 89131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

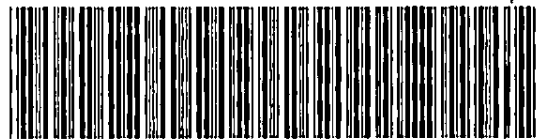
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AR EAGLE PAINTING CORP
Name of Corporation

DOCUMENT NUMBER: P17000089131

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:

JULIANA AQUILINO

Name of Contact Person

DESPACHANTE BRASILEIRO

Firm/Company

3961 N FEDERAL HWY

Address

POMPANO BEACH, FL 33064

City/State and Zip Code

despachantebr@hotmail.com

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

For further information concerning this matter, please call:

JULIANA AQUILINO

Name of Contact Person

at (954) 786-7180

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AR EAGLE PAINTING CORP

2. The principal office address: 2458 NW 89TH DRIVE, CORAL SPRINGS, FL 33065

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/02/2017 Document number: P17000089131

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)

ANDRESA CARVALHO
2458 NW 89TH DRIVE
CORAL SPRINGS, FL 33065

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TALLAHASSEE, FL

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):


RENATO DINIZ
2458 NW 89TH DRIVE
CORAL SPRINGS, FL 33065
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.

 RENATO DINIZ - VP
Signature of an officer of director Printed or typed name and title

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 my duties, and I am familiar with and accept the obligation of my 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.

 02/03/2021
Signature of Registered Agent Date

If signing on behalf of an entity:

Typed or Printed Name

***** 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 (04/13)