

P14000035942

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
15 JAN 20 PM 3:35

C.L.  
1-23-15

# **DIEGO HANDEL, ESQ**

**149 South Ridgewood Avenue  
Suite 220, Box N  
Daytona Beach, FL 32114**

**Phone: 386-252-4493**

**FAX: 386-248-2237**

**[dhandel@bellsouth.net](mailto:dhandel@bellsouth.net)**

January 15, 2015

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Change of Registered Agent/Office for FERREIRART INC.

Dear Sir or Madam:

Enclosed please find the following submitted in connection with the above-referenced matter:

1. Change of Registered Agent/Office for FERREIRART INC.
2. Filing fee in the amount of \$35.00, check #109

Thank you for your prompt attention to this matter.

Sincerely,



Diego Handel, Esq.  
DH/am  
Enclosure(s)

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FERREIRART INC  
Name of Corporation

**DOCUMENT NUMBER:** P14000035942

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:

Mayerlin Ferreira Quintal

Name of Contact Person

Firm/Company

3842 Calliope Avenue

Address

Port Orange, FL 32129

City/State and Zip Code

frescohealthyliving@gmail.com

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

For further information concerning this matter, please call:

Mayerlin Ferreira Quintal at 786 657-8032  
Name 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

**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: FERREIRART INC
2. The principal office address: 3842 Calliope Avenue  
Port Orange, FL 32129
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/22/2014 Document number: P14000035942

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)

LAMADRID FINANCIAL SERVICES CORP

1267 S PINE ISLAND RD

PLANTATION, FL 33324

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

Mayerlin Ferreira Quintal

3842 Calliope Avenue,

P.O. Box NOT acceptable

Port Orange, FL 32129

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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

Mayerlin Ferreira Quintal, President

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.*

  
Signature of Registered Agent

1/15/15  
Date

If signing on behalf of an entity:

Mayerlin Ferreira Quintal,

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 (03/12)