

230860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

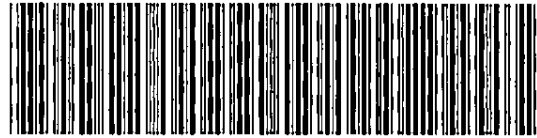
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Taco Metals, Inc.

Name of Corporation

DOCUMENT NUMBER: 230860

The enclosed Statement of Change of Registered Office

Please return all correspondence concerning this matter

fig 5 05

Scott Weiselberg

Name of Contact

Kopelowitz Ostrow Fergus

Firm/Company

1 West Las Olas Blv

Address

Fort Lauderdale, FL

City/State and Zip

weiselberg@kolawye

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

For further information concerning this matter, please call:

Scott Weiselberg

Name of Contact Person

at (954) 5254100

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: Taco Metals, Inc.
2. The principal office address: 50 N.E. 179th Street, Miami, FL 33162
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/7/1959 Document number: 230860

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)

Kopelowitz Ostrow Ferguson Weiselberg Keechl

200 SW 1st Ave., Suite 1200

Fort Lauderdale, FL 33301

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

Scott J. Weiselberg, Esquire

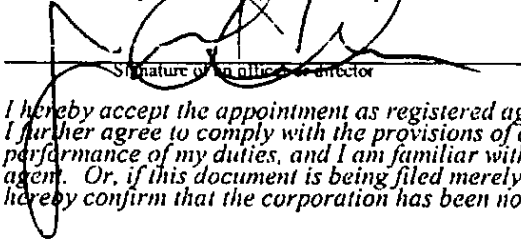
Kopelowitz Ostrow Ferguson Weiselberg Gilbert

P.O. Box NOT acceptable

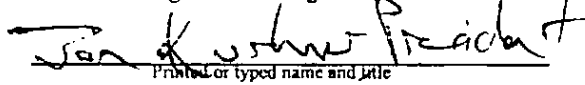
One West Las Olas Blvd. Suite 500, Fort Lauderdale FL 33301

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



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

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 (03/12)

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