

460821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400262097634

07/11/14--01029--011 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL 11 PM 1:13

C. LEWIS
JUL 25 2014
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Moving Squad
Name of Corporation

DOCUMENT NUMBER: 460821

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:

Sandy Schatzel
Name of Contact Person

Moving Squad
Firm/Company

2000 N State Rd 7
Address

Margate FL 33063
City/State and Zip Code

Assistant @ movingcost.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandy Schatzel at (954) 958-2236
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: MOVING Squad, Inc
2. The principal office address: 2000 N State Rd 7
Margate FL 33063
3. The mailing address (if different): same
4. Date of incorporation/qualification: _____ Document number: 460821

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)

Aldo Disorbo
6245 Powerline Rd
Fort Lauderdale FL 33309

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

Aldo Disorbo
2000 N State Rd 7
P.O. Box NOT acceptable
Margate FL 33063

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL 11 PM 1:13

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]
Signature of an officer or director

Aldo Disorbo - 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]
Signature of Registered Agent

7/7/14
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