

657441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re office change

AUG 03 2016

D CUSHING

#47822

COVER LETTER

Professional
To
Division of Corporations
\$35.00

TO: Amendment Section
Division of Corporations

SUBJECT: Manny's Enterprises, Inc.
Name of Corporation

DOCUMENT NUMBER: 657441

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:

Lorraine Quintero
Name of Contact Person

Manny's Enterprise, Inc
Firm/Company

306 International Parkway Suite "A"
Address

Sunrise, FL 33325
City/State and Zip Code

Lori @ manny's seafood.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori Quintero
Name of Contact Person

at 954, 472-4008
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

CR2E045 (03/12)

PAID

CK. NO. 6971
DATE 7/22/16

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TALLAHASSEE, FLORIDA

**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: Manny's Enterprises, Inc
2. The principal office address: 306 International Parkway, Suite "A"
Sunrise, FL 33325
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/27/1980 Document number: 657441

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)

Quintero, Manuel
7020 SW. 22nd Court
Davie, FL 33317

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

Quintero, Manuel
306 International Parkway
Sunrise, FL 33325

P.O. Box NOT acceptable

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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.

Lorraine Quintero
Signature of an officer or director

Lorraine Quintero (VP)
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

07-18-16
Date

If signing on behalf of an entity:

Manuel Quintero
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)