

F15 000004841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

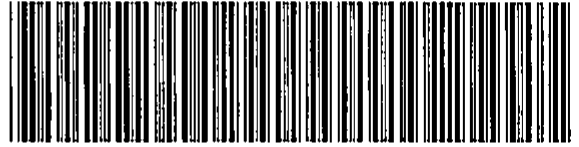
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200352858892

10/05/20--01011--010 ***85.00

201010016-01-F15 2:54
201010016-01-F15 2:54

1/10/1

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PEDON NORTH AMERICA INC
Name of Corporation

DOCUMENT NUMBER: F15000004841

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:

PEDON PAOLO

Name of Contact Person

PEDON NORTH AMERICA INC

Firm/Company

3250 NE 1ST AVE SUITE 305

Address

MIAMI FL 33137

City/State and Zip Code

logistics.miami@pedongroup.com

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

For further information concerning this matter, please call:

Pedon Paolo at (786) 558-0941
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
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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PEDON NORTH AMERICA INC
2. The principal office address: 3250 NE 1ST AVE SUITE 305 MIAMI FL 33137
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/08/2015 Document number: 10210074 SR#20150437051 F
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)

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

155 OFFICE PLAZA DRIVE, 1ST FL

TALLAHASSEE, FL 32301 US

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

PEDON NORTH AMERICA INC

3250 NE 1ST AVE SUITE 305

P.O. Box NOT acceptable

MIAMI FL 33137 US

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

PEDON PAOLO

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

09/15/2020

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)