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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ortex Enterprises, Inc - Change of Registered Agent
Name of Corporation

DOCUMENT NUMBER: _____

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:

Charles Pistor

Name of Contact Person

Ortex Enterprises, Inc.

Firm/Company

4310 Arrowswest

Address

Colorado Springs, CO 80907

City/State and Zip Code

cpistor@miraclemethod.com

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

For further information concerning this matter, please call:

Charles Pistor

Name of Contact Person

at (719)

9304782

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 Texas in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Ortex Enterprises, Inc.
2. The principal office address: 5825 Patton Street, Corpus Christi, TX 78414

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/08/2019 Document number: 887920280006

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)

Betty Prikryl

1708 Pam Circle

Orlando, FL 32809

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

Jamille Castro

6828 Hanging Moss Road

P.O. Box NOT acceptable

Orlando, FL 32807

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

Charles Pistone, Secretary
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

X 8.23.21
Date

If signing on behalf of an entity:

Jamille Castro

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