

F20000004752

(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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12/07/20--01015--010 **35.00

2021 FEB 26 PM 3:42

SIMMONS
MAR 15 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2021

ROLANDO DUMAGAN
13575 58TH STREET NORTH #240
CLEARWATER, FL 33760

SUBJECT: MEDPRO INTERNATIONAL INC.
Ref. Number: F20000004752

We have received your document for MEDPRO INTERNATIONAL INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Foreign Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 921A00001531

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MEDPRO INTERNATIONAL INC
Name of Corporation

DOCUMENT NUMBER: F2000000 4752

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROLANDO DUMAGAN
Name of Contact Person

MEDPRO INTERNATIONAL INC
Firm/Company

13575 58TH ST N
Address

LARGO FL 33760
City/State and Zip Code

ROLLO@MYTRANSARE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROLANDO DUMAGAN at 727 , 641 6272
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

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SECTION I
(1-3 MUST BE COMPLETED)

F20000004752
(Document number of corporation (if known))

1. MEDRO INTERNATIONAL INC
(Name of corporation as it appears on the records of the Department of State)
2. COLO RADO 3. 10/29/2020
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) _____

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

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Title/ Capacity	Name	Address	Type of Action
<u>D</u>	<u>ABHISHEK VARSHNEY</u>	<u>5315 TOMKEN RD #10</u>	<input checked="" type="checkbox"/> Add
		<u>MISSISSAUGA ON L4W</u>	<input type="checkbox"/> Remove
		<u>CANA DA</u>	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>D</u>	<u>AHMED SADIQUE</u>	<u>5315 TOMKEN RD #10</u>	<input checked="" type="checkbox"/> Add
	<u>ATHAM BAWA</u>	<u>MISSISSAUGA ON L4W</u>	<input type="checkbox"/> Remove
		<u>CANA DA</u>	
<u>D</u>	<u>SOURYA VARSHNEY</u>	<u>SCHUTZWALL 34</u>	<input checked="" type="checkbox"/> Add
		<u>HELMSTEDT 38350 LOWER SAXONY</u>	<input type="checkbox"/> Remove
		<u>GERMANY</u>	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

ROLANDO RUIZ AN

(Typed or printed name of person signing)

DP

(Title of person signing)

FILING FEE \$35.00