Division of Corporations Electronic Filing Cover Sheet

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(((H21000046821 3)))



H210000468213ABCY

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To: ·

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : RAUL VALDES-FAULI, P.A.

Account Number : I20180000021 Phone : (786)870-5083

Fax Number : (786)907-4006

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: VLAGANA@RVF-LAW.COM

REGISTERED AGENT CHANGE ABUELITO 803, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

VANESSA LAGANA, PARALEGAL Name of Contact Person	at (⁷⁸⁶	870-50	83	St
For further information concerning this matter, pl	ease call:			
E-mail address: (to be used for future annual	report notification	1)		
VLAGANA@RVF-LAW.CO				
City/State and Zip Code		•		•
CORAL GABLES, FL 33134	•			
Address				
355 ALHAMBRA CIRCLE, SUITE 1205				•
Firm/Company				
RAUL VALDES-FAULI, P.A.				
Name of Contact Person		,		
VANESSA LAGANA, PARALEGAL	,			
Please return all correspondence concerning this i	matter to the follow	ring:	•	
The enclosed Statement of Change of Registered			teu for finnig.	
	065 - 14 4 6		4-166U	
DOCUMENT NUMBER: F21000000441				
Name of Corporation	•	· ,		
SUBJECT: ABUELITO 803, INC				
TO: Amendment Section Division of Corporations				

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

CR2E045 (04/13)

FAX AUDIT #H21000046821 3

FAX AUDIT #H21000046821 3 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pwisuant to the p	provisions of sections 607.0502, 617.0. nge is submitted for a corporation orgo	502, 607.1508, or 617.1508, Florida Statutes, this anized under the laws of the State of Republic of			
		stered agent, or both, in the State of Florida.			
1. The name of t	the corporation: ABUELITO 803, INC.				
2. The principal	DRIVE, APT. 803, MIAMI, FL 33131				
3. The mailing H	nddress (If different):	Document number: F2100000441			
4. Date of incorp					
5. The name and		d agent and registered office on file with the			
	JORGE ABBUD				
	1420 BRICKELL BAY DR., APT. 803				
	MIAMI, FL 33131				
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and for registered office			
	RAUL VALDES-FAULI, P.A.				
	355 ALHAMBRA CIRCLE, SUPTIC 1205				
	P.O. CORAL GABLES, FL 33134	Box NOT ecreptable			
The street addr	uss of its registered office and the stre l be identical.	ect address of the business office of its registered agent,			
Such change w authorized by t	as authorized by resolution duly adop he board, op by copporation has been	oted by its board of directors or by an officer so notified in writing of the change.	2021		
4.	10 00	JORGE ABBUD, DIRECTOR	, <u>in</u>		
I hereby accept I further abree of my duties, to document to be corporation ha	the appointment as registered agent to camply with the provisions of all s and I am familiar with and accept the a ing field merely to reflect a change in a been notified in writing of this chan	and agree to act in this capacity, tottues relative to the proper and complete performance, obligation of my position as registered agent. Or, if this, the registered office address, I hereby confirm that they ge.			
		الــــــــــــــــــــــــــــــــــــ	ST == -	The same of	
	gnature of Registered Agent	Pear	\(\frac{1}{2}\)		
	ehalf of an entity:				
	DES-PAULI, ESQ. Typud or Printed Name				
'	- 1	FEE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (64/13)