

L12421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

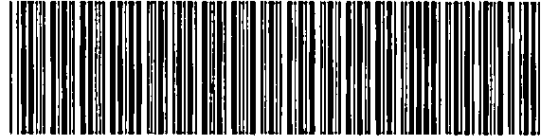
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INSTAVEST INC.

Name of Corporation

DOCUMENT NUMBER: 1.12421

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:

ANTHONY MARCHETTA

Name of Contact Person

INSTAVEST INC.

Firm/Company

5761 SW 88 TERR.

Address

COOPER CITY FLORIDA 33328

City/State and Zip Code

Prime.electrical@gmail.com

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

For further information concerning this matter, please call:

ANTHONY MARCHETTA

Name of Contact Person

at (305) 505-3195

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

1. The name of the corporation: INSTAVEST INC.
2. The principal office address: 5761 S.W. 88 TERR.
COOPER CITY FLORIDA 33328
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 1989 Document number: L 12421
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)

BARNEY AVCHEN (DEAD)

1840 W 49 street suite 226

Hialeah Florida 33012

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

Anthony Marchetta

5761 SW 88 Terr.

P.O. Box NOT acceptable

cooper City FLorida 33328

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.

Anthony Marchetta
Signature of an officer or director

ANTHONY MARCHETTA
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.

Anthony Marchetta
Signature of Registered Agent

APRIL 6 2022
Date

If signing on behalf of an entity:

ANTHONY MARCHETTA
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)

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