

N13000002671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TO: Amendment Section
Division of Corporations

SUBJECT: FOYER D'EPANOUISSEMENT DE LA JEUNESSE
Name of Corporation

DOCUMENT NUMBER: N13000002671

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:

MUGUETTE THENOR

Name of Contact Person

FOYER D'EPANOUISSEMENT DE LA JEUNESSE

Firm/Company

16448 SW 95 TH STREET

Address

MIAMI FLORIDA 33196

City/State and Zip Code

fej1978@gmail.com

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

For further information concerning this matter, please call:

PIERRE-ROMAIN REVEIL at (407) 2563670

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of the corporation: FOYER D'EPANOUISSEMENT DE LA JEUNESSE

2. The principal office address: 16448 SW 95TH STREET
MIAMI, FLORIDA 33196

3. The mailing address (if different): SAME AS ABOVE

4. Date of incorporation/qualification: 03/20/2013 Document number: N13000002671

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)

MUGUETTE FRANCILLON

13939 SW 155TH TER

MIAMI, FLORIDA 33177

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

MUGUETTE THENOR

16448 SW 95TH STREET

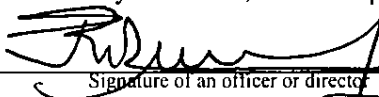
P.O. Box NOT acceptable

MIAMI FLORIDA 33196

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PIERRE-ROMAIN REVEIL

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.

MUGUETTE THENOR

Signature of Registered Agent

01/06/2014

Date

If signing on behalf of an entity:

PIERRE-ROMAIN REVEIL

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