

N24000004999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

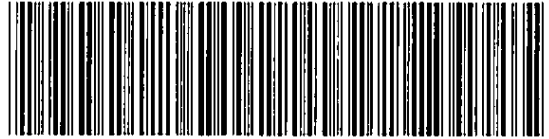
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Barock Pintos of the Eastern United States INC
Name of Corporation

DOCUMENT NUMBER: N24000004999

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:

Andrew S. Miller
Name of Contact Person

Firm/Company
18815 NE 5th Terrace Rd
Address

Citra, FL 32113
City/State and Zip Code

Andrew S. Miller 88@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Miller at (954) 675-8604
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
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: Barock Pintos of the Eastern United States INC
2. The principal office address: 18815 NE 5th Terrace Rd Citra, FL 32113

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/19/24 Document number: N24000004999

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)

Resigned Legal Corp Solutions, LLC
3440 W Hollywood Blvd. Suite 415
Hollywood, FL 33021

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

Andrew Miller
18815 NE 5th Terrace Rd
P.O. Box NOT acceptable
Citra, FL 32113

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.

Andrew J. Miller
Signature of an officer or director

Andrew J. Miller
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.

Andrew J. Miller
Signature of Registered Agent

Andrew J. Miller
Date

If signing on behalf of an entity:

Typed or Printed Name

***** FILING FEE: \$35.00 *****