

P00000035745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

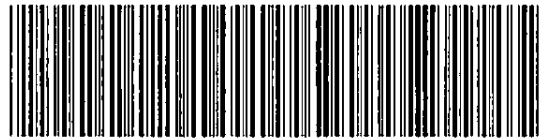
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TALLAHASSEE, FL

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: EUROAMERICAN KROME, INC  
Name of Corporation

DOCUMENT NUMBER: P00000035745

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:

ANGEL TORRES

Name of Contact Person

EUROAMERICAN GROUP INC

Firm/Company

407 LONCORN R #PH-N

Address

MIAMI BEACH, FL 33139

City State and Zip Code

atorres@euroamericangroup.com

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

For further information concerning this matter, please call:

ANGEL TORRES

Name of Contact Person

at (305)

672-0805

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

CR210450-4131

2024 SEP 24 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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 617.1503, 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: EUROAMERICAN KROME INC
2. The principal office address: 407 LINCOLN RD #PH-N MIAMI BEACH, FL 33139
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4-07-2000 Document number: P00000035745
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)  
LAURA E. KELLY P.A.  
1430 S DIXIE HWY #309  
CORAL GABLES, FL 33146

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

EUROAMERICAN GROUP INC

407 LINCOLN RD #PH-N

P.O. Box NOT acceptable

MIAMI BEACH, FL 33139

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.

ANGELO TORRES

Signature of officer or director

ANGELO TORRES

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.

Guy

Signature of Registered Agent

9/12/24

Date

If signing on behalf of an entity:

ANGELO TORRES

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 (04-12)