P00000071872

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations				
On Time Drinking 9 Const Contact	2			
SUBJECT: On Time Printing & Copy Center, (Name of Corporatio	n)			
DOCUMENT NUMBER: P00000071872				
The enclosed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.			
Please return all correspondence concerning this matter to the fo	llowing:			
Sandra Veloz				
(Name of Contact Person)				
On Time Printing & Copy Center, Corp (Firm/Company)				
(Firm/Company)				
5895 NW 36 Street (Address)				
(Address)				
Mimai, FL 33166				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Sandra Veloz	05 \ 870-0158			
(Name of Contact Person) (A	05 870-0158 rea Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of \$	State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
	1 ananassee, 1 L 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH . FOR CORPORATIONS

statement of cl	hange is submitted for a corporation	517.0302, 607.1308, or 617.1308, Flort n organized under the laws of the State r registered agent, or both, in the State	of_Florida
1. The name o	f the corporation; On Time Printi	ng & Copy Center, Corp.	
2. The principa	al office address: 5895 NW 36 St	treet - Miami, FL 33166	
3. The mailing	address (if different): same		
4. Date of inco	prporation/qualification: 07/25/20	Document number: P00	000071872
	nd street address of the current registartment of State:	stered agent and registered office on file	
	Sandra Veloz		— 48 86 —
	3510 SW 122 AVE - N	Miami, FL 33175	P 16
6. The name ar (if changed)		red agent (if changed) and /or registered	ANII: 00 OF STATE E. FLOSIO
	Mirna Torres		
	3510 SW 122 AVE - N		
The street add as changed wi	ress of its registered office and the	e street address of the business office	of its registered agent,
\mathcal{L}	was authorized by resolution duly the board, or the corporation has l	adopted by its board of directors or by been notified in writing of the change (Printed or typed name)	Veloz
I hereby accel I further agree of my duties, a document is b corporation h	of the appointment as registered a e to comply with the provisions of and I am familiar with and accept eing filed merely to reflect a chan as been notified in writing of this	gent and agree to act in this capacity, all statutes relative to the proper and the obligation of my position as regis ge in the registered office address, I k change.	complete performance tered agent. Or, if this vereby confirm that the
My	Les	MIRNA low	erts
/.	Signature of Registered Agent)	(Date)	
II signing on b	ochalf of an entity:		
	(Typed or Printed Name)	_	

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