

P00 000057403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

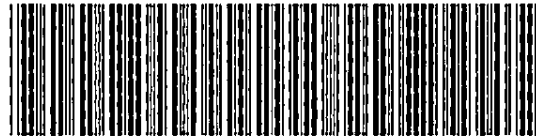
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000352408370

09/25/20--01014--015 \*\*35.00

FILED  
2020 SEP 25 PM 4:57  
CLERK OF STATE  
TALLAHASSEE, FL

12/17/20

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Los Cabos, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P00000087403

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:

Beth Rabe

Name of Contact Person

K&J Accounting

Firm/Company

255 SW 153rd St

Address

Burien, WA 98166

City/State and Zip Code

beth@kjaccounting.net

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

For further information concerning this matter, please call:

Beth Rabe

Name of Contact Person

at (206)

244-0491

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: Los Cabos, Inc.
2. The principal office address: 8800 State Road 84  
Davie, FL 33324
3. The mailing address (if different): PO Box 48237 Seattle, WA 98148
4. Date of incorporation/qualification: 9/14/2000 Document number: P00000087403
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)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301-2525

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

Joel Ramirez

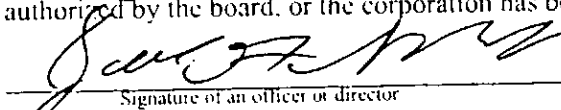
5181 Sheridan Street

P.O. Box NOT acceptable

Hollywood, FL 33021

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

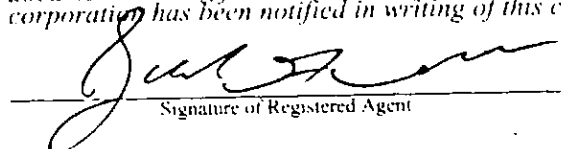
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Joel Ramirez, DIR

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.

  
Signature of Registered Agent

11-28-20  
Date

If signing on behalf of an entity:

Joel Ramirez

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)

2020 SEP 25 PM 4:57

FILED

DEPT OF STATE  
TALLAHASSEE, FL