P01000007371

(Re	questor's Name)	<u></u>
(Ad	dress)	 · · · · · · · · · · · · · · · · · ·
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	y/State/Zip/Phone	. # \
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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2009 MAY 20 PM 2: 12
SECRETARY OF STATE

R.A. 5/27/09

COVER LETTER

TO: Amendment Division of C				
SUBJECT:	Mecias Constru Name of C	uction Corp.		
DOCUMENT NUM	BER:P01	000007371	<u> </u>	
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:				
		Mecias		
_	Name of Co	ontact Person		
Mecias Construction Corp. Firm/Company				
	rani/C	ompany		
	159/1 Pine	es Blvd #233		
-		ress	_	
	Pembroke Pi	nes, Fl 33027		
City/State and Zip Code				
	maciasil@v	rahaa cam		
meciasjl@yahoo.com E-mail address: (to be used for future annual report notification)				
For further information	on concerning this matter, please	call:		
		700		
	Juan Mecias of Contact Person	at (786) 3 Area Code & Daytime To	856-7087 Elephone Number	
	or comuci retoon	, nou cout to buy mile it		
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 Corpora		
	P.O. Box 6327	Clifton Building	1110113	
	Tallahassee, FL 32314	2661 Executive Cer	nter Circle	
		Tallahassee, FL 323		

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of	Florida
-	the corporation: Mecias Construction, Corp.	
2. The principal	office address: 15841 Pines Blvd #233 Pemnroke Pines, Fl 330	027
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: January 18, 2001 Document number:	P01000007371
	d street address of the current registered agent and registered office on file wrtment of State: (If resigned, enter resigned)	ith the
	Annie Mecias (resigned)	_
	5620 SW 185 Way	22
	Ft. Lauderdale, Fl 33332	SECH SECH
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	m-≺ ~~
	Juan Mecias	PH 2: PF STA
	16277 NW 13 Street	INTE ORID
	P.O. Box NOT acceptable	D
	Pembroke Pines, Fl 33028	_
The street address changed will	ess of its registered office and the street address of the business office of be identical.	its registered agent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by a ne board, or the corporation has been notified in writing of the change.	n officer so
		/ VICE President
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and cond I am familiar with and accept the obligation of my position as registering filed merely to reflect a change in the registered office address, I here to be notified in writing of this change.	mplete performance ed agent. Or, if this by confirm that the
Sio	nature of Registered Agent Date	
_	chalf of an entity:	
т	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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