

PD2000012912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

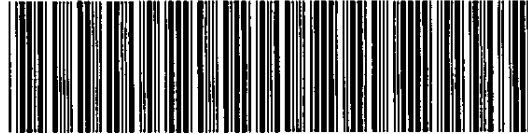
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500275486715

08/03/15--01004--004 **35.00

11:10
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 AUG 11 AM 11:21

AUG 14 2015
C LEWIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 4, 2015

SIMONE MAYER / FOH, INC.
7630 BISCAYNE BLVD.
MIAMI, FL 33138 US

SUBJECT: FOH, INC.
Ref. Number: P02000012912

We have received your document for FOH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

We have to have one signature on this form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 415A00016373

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **FOH, INC.**

Name of Corporation

DOCUMENT NUMBER: **P02000012912**

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:

SIMONE MAYER

Name of Contact Person

FOH, INC.

Firm/Company

7630 BISCAYNE BLVD

Address

MIAMI, FL 33138

City/State and Zip Code

AMY@FOH.CC

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

For further information concerning this matter, please call:

AMY LEDESMA

Name of Contact Person

305 757-7940

at (_____) _____
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: FOH, INC.
2. The principal office address: 7630 BISCAYNE BLVD
MIAMI, FL 33138
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/05/2002 Document number: P02000012912

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)

SIMONE MAYER

9315 PARK DRIVE

MIAMI SHORES, FL 33138

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

SIMONE MAYER

7630 BISCAYNE BLVD

P.O. Box NOT acceptable

MIAMI, FL 33138

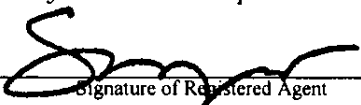
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

SIMONE MAYER
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

07/23/2015

Date

If signing on behalf of an entity:


Typed or Printed Name

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 AUG 11 AM 11:21