

P000000022535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

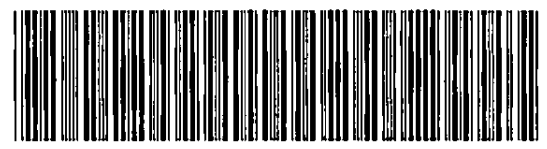
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/25/18--01030--012 **35.00

Richy

R. WHITE
SEP 26 2018

FILED
2018 SEP 24 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CARIBBEAN PARKING SYSTEMS, INC.
Name of Corporation

DOCUMENT NUMBER: P020000 22535

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:

Wendy Singer
Name of Contact Person

Caribbean Parking Systems, Inc.
Firm/Company

7401 Wiles Road Suite 216
Address

Coral Springs FL 33067
City/State and Zip Code

Wendy.C@bbcm.com my acc.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wendy Singer at (305) 239-8889 x 104
Name of Contact Person 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: CARIBBEAN PARKING SYSTEMS, INC.
2. The principal office address: 175 SW 7 STREET SUITE 1908
MIAMI FL 33130
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 2/25/02 Document number: P02000022535
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)

MITCHELL LISS

1201 S. 13th Avenue

HOLLYWOOD, FL 33019

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

MITCHELL LISS

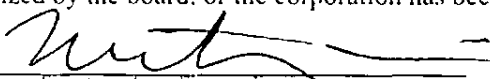
175 SW 7 STREET SUITE 1908

P.O. Box NOT acceptable

MIAMI FL 33130

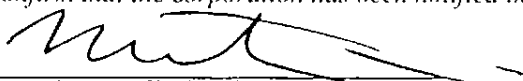
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

MITCHELL LISS, PRESIDENT
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

9/18/18
Date

If signing on behalf of an entity:

Typed or Printed Name

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