P02000039292

(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 .



900249109389

06/24/13--01009--015 **35.00

13 JUN 24 PH 2: 20

JUN 2 5 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation

POCLIMENT NUMBER: P02000039292

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:

Name of Contact Person

HVAC/R International Inc.

Firm/Company

836 W 18th St.

Address

Hialeah, FL 33010

City/State and Zip Code

Nicole@DBAmericas.com

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

For further information concerning this matter, please call:

Nicole Hogan

Name of Contact Person

at (305 883-0655)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, thange is submitted for a corporation organized under the laws of the State of Florida Her to change its registered office or registered agent, or both, in the State of Florida.	his ——	
1. The name of	f the corporation: HVAC/R International, Inc.		
2. The principa	al office address: 836 W 18th St., Hialeah, FL 33010		
3. The mailing	address (if different):		
4. Date of incorporation/qualification: 4/11/2002 Document number: P02000039292			
5. The name ar	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)		
	Eric Hogan		
	1640 Weeping Willow Way		
	Hollywood, FL 33019	-1	SIAIE 33
6. The name ar (if changed)	nd street address of the new registered agent (if changed) and /or registered office	13 JUN 24	CRETARY OF STA
	Eric Hogan	2	
	836 W 18th St	ζ	
	P.O. Box NOT acceptable Hialeah, FL 33010	20	Or.
The street add as changed wi	ress of its registered office and the street address of the business office of its registered be identical.	ed agent,	,
	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.		
Signa	David Hogan - President Printed or typed name and title		
I hereby accept further agree	of 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 complete of my duties, and I am familiar with and accept the obligation of my position as regist his document is being filed merely to reflect a change in the registered office address In that the corporation has been notified in writing of this change.	tered t, I	
-W	hgnature of Registered Agent Date		
If signing on b	pehalf of an entity:		
	T. Handard News		

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