

P020000 79345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

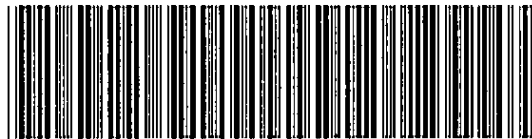
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NVJ Multiservices Inc
Name of Corporation

DOCUMENT NUMBER: P02000079345

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:

Jackie Valledor

Name of Contact Person

NVJ Multiservices Inc

Firm/Company

393 Pompano Drive

Address

Key Largo FL 33037

City/State and Zip Code

NVJMultiservices@gmail.com

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

For further information concerning this matter, please call:

Jackie Valledor

Name of Contact Person

at (305)

389-7536

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 DEC 23 PM 1:56

December 12, 2021

JACKIE VALLEDOR
393 POMPANO DRIVE
KEY LARGO, FL 33037

SUBJECT: NVJ MULTISERVICES, INC.
Ref. Number: P02000079345

We have received your document for NVJ MULTISERVICES, 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.

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.

Irene Albritton
Regulatory Specialist III

Letter Number: 821A00029897

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: NVJ Multiservices Inc
2. The principal office address: 393 Pompano Drive Key Largo FL 33037

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/02/2002 Document number: P02000079345

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)

MASTER ACCOUNTANTS, PA10041 SW 40 STMIAMI, FL 33165

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

Jacqueline Valledor

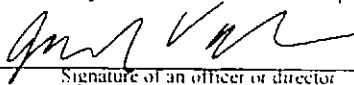
393 Pompano Drive

P.O. Box NOT acceptable


Key Largo FL 33037

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.

 11/18/2021 Jacqueline Valledor
Signature of an officer or director 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.

 12-16-2021
Signature of Registered Agent Date

If signing on behalf of an entity:

Jackie Valledor (Jacqueline Valledor)
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

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