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COVER LETTER

TO: A

Amendment Section Division of Corporations

_{surrect:}Linda Enterprises Inc

Name of Corporation

DOCUMENT NUMBER:

P03000003849

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:

Luz Marina Paz

Name of Contact Person

Linda Enterprises Inc

Firm/Company

30 Grand Bay Estates Cir.

Address

Key Biscayne, Florida 33149

City/State and Zip Code

eje582@icloud.com

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

For further information concerning this matter, please call:

Guillermo Iglesias

,,305

4717545

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

statement of cha	provisions of sections 607.0502, 617.0502 ange is submitted for a corporation organi er to change its registered office or registe	ized under the laws of the	State of Florida
2. The principal	the corporation: Linda Enterprises office address: 30 Grand Bay Es ayne, Florida 33149	s Inc states	
3. The mailing a Miami,	address (if different): 2 SW 24th Roa Florida 33129		
4. Date of incorp	poration/qualification: 01/10/2003	Document number:	P03000003849
5. The name and	d street address of the current registered ag rtment of State: (If resigned, enter resigned	gent and registered office	
	Resigned		
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or reg	istered office
	Best Accounting Inc		
	10200 NW 25th street Suite	209	and the second s
	P.O. Box NOT a Doral, Florida 33172	acceptable	21
as changed will			
Such change wa authorized by t	as authorized by resolution duly adopted be board, for the comparation has been not	by its board of directors ified in writing of the ch	ange.
Signatu	arc of air officer or diffeetor	Printed or typed	· · · · ·
I Juriner agree i performance of	the appointment as registered agent and to comply with the provisions of all statumy duties, and I am familiar with and ac is document is being filed merely to reflet that the corporation has been notified in	tes relative to the proper	r and complete v nosition as registered
(will	leners Tolenas	7/12/2	016
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Guille	Esse Sofered		
GUILLERA	yped or Printed Name No In Col 146 * * * FILING FEE	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)