

P03D000096112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR -7 AM 11:48

RA/change
@ 3/10/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARIES PERMITS SOLUTION, INC
(Name of Corporation)

DOCUMENT NUMBER: P03000096112

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:

ADAN G. HIDALGO
(Name of Contact Person)

ARIES PERMITS SOLUTION, INC
(Firm/Company)

15185 SW 172ND ST
(Address)

MIAMI, FL 33188
(City/State and Zip Code)

For further information concerning this matter, please call:

ADAN G. HIDALGO at (786) 355-8989
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2008

DENISE SNOW
TIMESHARE RESCUE, INC
499 10TH COURT
VERO BEACH, FL 32962

SUBJECT: ARIES PERMITS SOLUTION, INC.
Ref. Number: P03000096112

We have received your document for ARIES PERMITS SOLUTION, 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 fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

YOU CAN SUBMIT THE ADDITIONAL MONEY TO FILE THE RESIGNATION
OR YOU CAN COMPLETE THE ENCLOSE FORM TO CHANGE THE
REGISTERED AGENT.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 308A00007942

RECEIVED
2008 MAR -7 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: ARIES PERMITS SOLUTION, INC
2. The principal office address: 15185 SW 172ND ST - MIAMI, FL 33188
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/25/2008 Document number: P03000096112
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NAME: DAMARYS HIDALGO

ADDRESS: 15185 SW 172ND AVENUE

MIAMI, FL 33187

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

NAME: ADAN G. HIDALGO

ADDRESS: 15185 SW 172ND AVENUE

(P.O. Box NOT acceptable)

MIAMI, FL 33187

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.

X


(Signature of an officer or director)

ADAN G. HIDALGO

(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.

X


(Signature of Registered Agent)

02/25/2008

(Date)

If signing on behalf of an entity:

(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

CR2E045 (8/05)

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DIVISION OF CORPORATIONS
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